

## Hurley and Riverside Patient Participation Group

### Patients' Survey 2019

#### Analysis of responses and comments on survey

1. This was the first patient survey after the merger between the Hurley and Riverside practices in April 2019. The combined practice has around 27,000 patients on the two sites with roughly equal numbers at each – 13,500 patients. We decided that as the survey was concerned with patient care, we could alert patients by text message as well as putting paper forms in the waiting areas at both sites. The overall response to the survey was much higher than in 2018 with a total of 975 from the two sites compared with 305 from the Hurley alone in 2018. There were 805 responses on-line and 170 paper forms, almost all from the Hurley; as in 2018 the reception staff there did a good job of encouraging patients to complete the paper forms. The different population plus lack of familiarity with the survey at Riverside probably explains why there was such a high online response from patients there but no paper ones. As before, there were enough responses to show patients' views clearly which is the main purpose of the exercise.
2. We revised the questionnaire slightly from the one used in 2018 by adding questions about use of the two sites but that does not affect the overall results. It is designed to be easy and quick to complete, but there are clearly still problems for those with limited English. Some respondents also used the open-ended questions to complete their answers which meant that we could not easily use their data. That is probably unavoidable and should not have affected the overall results. Unfortunately we were again not able to revise the layout of the printed version so there were quite a lot of incomplete forms because of missed pages. Doing the analysis of the results showed that although the questionnaire is adequate for our fairly limited purposes, it could be improved by some major revisions. We will have to think about that for next year.
3. The age range of the respondents (Q28) was remarkably similar to that in previous years, despite the very different population at Riverside compared with the Hurley. 17% were aged 65 and over compared with 20% in 2018. 81% were aged between 25 and 64 (76% in 2018) and 2.5% aged 18-24 (4% in 2018), with only two (0.2%) under 18. As usual, some respondents were almost certainly parents attending the surgery with their children. 59% were in full-time employment (54% in 2017) and 45% described themselves as 'White British', compared with 48% in 2018. As before, these figures correspond fairly closely with the demographics of the practice's overall catchment area in north Lambeth.
4. We have not been able to analyse the data to show which age groups are the heaviest users of the practice as a whole. It is well-known that younger patients (under around 25 and especially young children) and old (55 and over) are the heaviest users of medical services in general but our survey does not illustrate that because the questions are not designed for that purpose. The paper forms do, however, show that a significant proportion of them were completed by older patients.
5. There were 409 answers (42% of respondents) to Q19 'What other services would you like offered by the surgery?' and 366 comments, some of them lengthy, in response to Q27 'Have you any other comments that can help us to improve the service we offer you?' (38% of respondents compared with 40% in 2018 at the Hurley alone). The answers to the two questions as usual overlapped considerably. Several respondents to Q19 said they did not want new or additional services but for the existing ones to work better, an understandable point of view. There was the usual shopping-list of other services sought including home visits, counselling, particularly for addiction of various kinds, CBT, physiotherapy, occupational therapy, osteopathy, blood tests, minor surgery, women's services, contraception, sexual health and travel vaccinations. Some of those, including home visits, are already available but there were also requests for more information about what services

are provided and for better, more user-friendly, IT services.

6. There were some very positive and supportive comments about both Hurley and Riverside staff and services (including clinical services and the reception staff) in response to both Qs19 and 27 but most of the specific comments in answer to both questions were negative and as in previous years there were several generalised grumbles that showed significant dissatisfaction with the services at both sites. That follows the previous pattern: it is clear that despite the widespread publicity given for several years to the lack of doctors and nurses and other difficulties experienced by general practices, especially in inner cities, most patients still have high expectations and can be very critical (or feel let down) when the service does not match those expectations.
7. Some individual clinicians and other staff were singled out for praise but there were also comments about unsympathetic clinicians and unhelpful or rude reception staff. There are descriptions of individual patient episodes, including clinical ones, which suggest that there may have been misunderstandings or errors that need further investigation. The numbers may not be big in relation to the total number of patients seen at the two sites in the course of a year but they are nevertheless a cause for concern. As the questionnaires were completed anonymously, the complaints cannot be followed up with the patients concerned but there are nevertheless lessons to be learned.
8. The main complaints and associated requests are not new: long waits for pre-booked appointments, so more doctors and hence more appointments sought; the difficulty of getting urgent or emergency appointments at short notice and dislike of the triage system; general problems with the operation of the appointments system, particularly the difficulty of getting through on the telephone first thing in the morning; lack of regular doctors and high dependence on locum doctors leading to lack of continuity of care; and problems with prescription renewal especially because of use of locums. There were several patients who said that they had used private doctors because of the difficulty of getting appointments at Hurley/Riverside.
9. In response to Q19, there were several requests for drop-in/walk-in clinics for urgent cases. There were criticisms of the website and the various online services are not particularly popular or considered user-friendly although some younger respondents wanted more (and better) online services. The lack of a regular phlebotomist at the Hurley and difficulties in getting test results were both remarked. There were adverse comments on the general state of the waiting area in the Hurley in particular and requests for drinking water plus magazines to be provided. There were several complaints about the dirty state of the toilets at the Hurley but they may have been prompted by the specific question on that point.
10. There were 426 answers to Q20 about the effects of the merger between the Hurley and Riverside practices and reactions were distinctly mixed with many seeing room for improvement. For some patients, the process seems to have gone smoothly and led to an improved service, while for others it has caused muddle and confusion. It is also not always clear whether the remarks referred to the specific effects of the merger but there were several complaints from patients who were, for example, referred to the wrong site to collect prescriptions or see a particular doctor. There were also numerous complaints about the post-merger problems with the IT system at Riverside. The responses need to be analysed in detail and followed up where necessary.
11. The number of complaints about reception staff remains small in relation to the total number of patients seen. As before, the complaints probably reflect more than anything else the frustration on the part of patients at the difficulties of getting through on the telephone and long waits for appointments as well as the communication problems that sometimes arise. They may also reflect dislike of the role of the reception staff in the triage system for booking urgent/same day appointments. The responses to Q6 showed that 85% of respondents thought that their treatment by reception staff was acceptable or better. That

is lower than the 90% at the Hurley in 2018 but still suggests that most complaints arose from individual incidents rather than as part of a more general pattern. We know that language problems may account for some of the difficulties experienced by some patients in dealing with the reception staff as well as other communication difficulties described in the open-ended questions.

12. A small number of respondents wanted longer opening hours but overall 94% of the respondents to Q4 about opening times found them acceptable or better. There were, however, several requests in response to Qs 20 and 27 for more evening and Saturday morning appointments or generally longer opening hours. As before, the responses to Q4 (about preferred times for appointments) show a clear preference for early morning appointments (47%) which must, as usual, partly reflect the attitude of many employers to staff taking time off for medical appointments possibly combined with the effect of zero-hours contracts.
13. There was a range of comments on communications with/from the practice, particularly about the various on-line services. As already noted, there were some general comments about the need for better online services: the website was singled out for criticism by a small number of respondents and there were complaints about the online booking system and aspects of the e-consult service. There were numerous complaints about the difficulty of getting through on the telephone in the early morning (around 8.00 am) and 39% of respondents to Q7 about ease of telephone access found it difficult to get through on the telephone, while 38% found it 'as expected'. The digital divide is still there (and very few patients use e-mail to communicate with the surgery) but there is some evidence that more patients would use the on-line services if they thought they worked better, although few recognise the impact on user-friendliness of the need to safeguard patient confidentiality. There was one request for text messages to be used if doctors were running late but otherwise no requests for more or different use of text messages, which suggests that patients are mostly satisfied with how that part of the system works.
14. The answers to Qs 11 and 12 about waiting times to see a doctor show that 34% of patients had to wait more than two weeks to see their preferred doctor (if they had one), compared with 46% at the Hurley in 2018, while 15% said in answer to Q12 that they had to wait over two weeks if they did not mind which doctor they saw. That is a notable improvement on the position at the Hurley in 2018, although it is not reflected in the comments in response to Qs 20 and 27 which still show much frustration at the difficulties of access and long waits that patients experience. The majority of patients may have accepted that for non-urgent conditions they have to wait for appointments, especially with a particular doctor, but they still do not like it. Other ways of managing demand, such as the telephone triage system, remain unpopular and almost certainly affect the number of complaints about reception staff. Despite the improvements in waiting times, the strains are still showing.
15. The PPG will, as usual, follow up the survey's findings with the practice. This survey is the first to be done by the new combined Hurley and Riverside practice in conjunction with the PPG (and the ninth to be done by the Hurley with the PPG) and has, as always, provided useful feedback from patients. We would like to thank all those who took the trouble to complete the questionnaire as well as those members of the Steering Committee who helped with inputting the paper questionnaires. We would also like to thank Dr Kumar for his help with revising the questionnaire and Shaju Panickar and Pam Elliott for setting it up and doing the initial analysis of the results.

**Q1 In the past 12 months, how many times have you seen a doctor or nurse from the practice?**

54% of 2019 respondents said they had seen a doctor or nurse three times or more, a slightly lower figure than at the Hurley alone in 2018. Of those, 41% had seen a doctor or nurse 3 to 6 times and 13% had seen a doctor or nurse seven times or more.

**Q2 Have you used the econsult online application which can be found on the practice website and allows to to consult with a GP online?**

This is a new question. 27% had used econsult while 73% had not.

**Q3 Have you used the econsult application for finding information on self-help; or any other help?**

Half the respondents (42% of the total) had used econsult for self-help and half for other purposes such as administrative queries.

**Q4 The Hurley Clinic is open from 8am until 6.30 pm 3 days a weel, 7am until 7.30pm on Tuesdays and 7a, to 6.30pm on Thursdays. The Riverside Medical Centre is open from 7.30am until 6.30pm 3 days a week and 7.30am until 8pm on Wednesdays and Thursdays. How do you rate the hours the practice is open?**

6% thought the hours were less than acceptable 94% while thought them acceptable or better (28% thought them very good). That is a slight improvement on the Hurley in 2018 when 9% thought them less than acceptable and 91% thought them acceptable or better.

**Q5 What is your preferred time to see a GP or nurse?**

47% preferred early morning appointments, the same as at the Hurley in 2018. As before, this corresponds with the number in full-time work. 20% were satisfied with the times available. 7% wanted Saturday morning appointments.

**Q6 How do you rate your experience with the Receptionist team?**

15% of respondents (10% at the Hurley in 2018) said their treatment by the reception staff had been less than acceptable while 85% found it acceptable or better (90% in 2018). There were some adverse comments about experiences with the reception staff in answer to Q27.

**Q7 In the past 6 months, how easy have you found the following: getting through on the phone?**

40% of respondents found it difficult and 38% as expected, compared with 34% and 41% respectively at the Hurley in 2018. 'As expected' probably means that they found it difficult but had not expected anything else. That is not a big deterioration but there were a lot of comments on the time taken to get through on the telephone, particularly first thing in the morning

**Q8 In the past 6 months, how easy have you found the following: speaking to a doctor on the phone?**

20% had found it difficult compared with 24% at the Hurley in 2018, which is a slight improvement, while 24% had found it as expected compared with 29% in 2018, so a deterioration. There were several complaints about the difficulty of being available to be rung back by a doctor and failure to return calls.

**Q9 In the past 6 months, how easy have you found the following: getting test results on the phone?**

32% had not wanted to get test results in that way (close to the 30% at the Hurley in 2018) and 25% had found it as expected (the same as in 2018). 15% had found it difficult, more or less the same as the 16% in 2018.

**Q10 In the past six months, how easy have you found the following: e-mailing the surgery?**

42% of respondents had not wanted to e-mail the surgery, very close to the 41% at the Hurley in

2018. 25% did not know, 10% found it difficult, fewer than the 13% in 2018, and 16% as expected. Many patients are clearly still either unwilling to use e-mail for contacting the surgery or do not know that they can. They may also not have access to a computer which makes using e-mail much easier than a mobile telephone. It is also still not a method of communication that the surgery seems to encourage, possibly because of concerns about confidentiality although many patients prefer it.

**Q11 How quickly do you usually get to see the doctor that you prefer?**

5% said they saw a particular doctor the same day (compared with 3% at the Hurley in 2018), 3% the next working day (more than the 2% in 2018), 12% within a week, 17% within two weeks and 34% had to wait over two weeks (46% in 2018) and 29% didn't know (more than the 24% in 2018). This suggests that it has become easier to see a preferred doctor (there has been rather more stability in doctors at the practice for most of 2018-19) although the relatively large number of 'don't knows' makes it difficult to interpret the figures.

**Q12 How quickly do you usually get to see any doctor when it does not matter whom you see?**

These figures mostly show a noticeable improvement on 2018 at the Hurley: nearly 21% (nearly 10% in 2018) saw a doctor on the same day and a further 9% on the next working day (6% in 2018), 23% within a week (27% in 2018), and nearly 22% within two weeks (24% in 2018). 15% said they had to wait over two weeks (25% in 2018) while 10% didn't know (8% in 2018). These figures do not match the frequency of the complaints about long waits for appointments but as with Q11 they rely on sometimes imperfect memories.

**Q13 How quickly do you usually get to see a nurse when you need to?**

45% of respondents did not know (or possibly did not need to see a nurse) while 15% saw one on the same day or next working day. 24% saw one within a week and 11% within two weeks. These are broadly similar figures to 2018. In some cases, patients may prefer to fit in nurse appointments with other commitments and prefer to wait.

**Q14 If you need to see a doctor urgently, can you normally get seen within a day?**

34% said yes (29% at the Hurley in 2018), 29% said no (35% in 2018) and for 38% (36% in 2018) it had not happened. As in 2018, this suggests that, despite the shortages of doctors, urgent clinical needs are being met more quickly than in 2018. There are, however, numerous complaints about the difficulty of getting an urgent/same day appointment which is clearly a source of concern for patients, especially parents of young children.

**Q15 How late is your doctor or nurse to see you usually?**

63% of respondents normally saw a doctor or nurse within 15 minutes of their appointment time, significantly more than the 56% at the Hurley in 2018. 25% said they had to wait less than 30 minutes so overall 88% of patients did not have to wait more than 30 minutes. The use of text reminders may help patients as well as clinicians. There were a few complaints about long waits and a couple of cases where patients had been sent to the wrong site but punctuality among the clinical staff still does not appear to be a major problem.

**Q16 Do you have a regular doctor?**

24% (20% at the Hurley in 2018) said yes and 49% (55% at the Hurley in 2018) said no, but they would like one while 27% (25% in 2018) said no, they had not really needed one. As before, there were many complaints about the lack of continuity of care, no regular doctors and a dislike of the practice's dependence on locums. A lot of patients are also confused by the current system whereby they are allocated to a practice rather than a specific doctor, but still have to be referred to a hospital by a specific doctor.

**Q17 If yes, how often do you see that regular doctor?**

As usual, this question has produced inconsistent answers with those to Q17 but 32% said they saw their regular doctor almost always or a lot of the time (22% at the Hurley in 2018) which is a significant improvement. 33% (28% at the Hurley in 2018) saw their regular doctor sometimes and 36% almost never. These responses still reflect the lack of regular doctors.

**Q18 Are you aware that you can see a doctor or a nurse at a neighbouring 'hub' surgery such as the one at South Lambeth Road, or Vassall Road Medical Centre?**

The 'hubs' were first introduced in 2015 and are designed to even out capacity in neighbouring surgeries. 42% of respondents said they knew about them (many fewer than the 64% at the Hurley in 2018) and 58% did not.

**Q19 What other services would you like to be offered by the Hurley and Riverside Practices?**

Open question separately analysed.

**Q20 Following the recent merger of Hurley Clinic and Riverside Medical Centre, what changes have you experienced since the merger?**

Open question separately analysed.

**Q21 Are there things you feel could be improved since the merger?**

Open question separately analysed. Responses were very mixed and some patients were obviously confusing Riverside with the South Lambeth Road practice. Some Riverside patients obviously feel that the service there has suffered since the merger while Hurley patients seem to have found fewer changes.

**Q22 Which of the sites do you regularly use?**

Almost exactly half and half. This is chance but reflects the relative size of the practices.

**Q23 Have you used the other site since the merger?**

12% said yes and 88% said no. Some of the responses to other questions, especially Q20, suggest that quite a few patients did not know about the merger or that they could use the other site. They were also confused between the different sites and hubs.

**Q24 Are you likely to use the other site in future?**

31% said yes and 69% said no but it is difficult to interpret these responses.

**Q25 Are you aware of North Lambeth Primary Care Network (Hurley and Riverside Practices, Waterloo Health Centre, Vauxhall Surgery, South Lambeth Road Practice, Mawbey Brough Health Centre)?**

26% said yes and 74% said no.

**Q26 How would you rate the cleanliness of the Hurley and Riverside Practices?**

96% (the same as in 2018 at the Hurley) found it as clean or cleaner than expected, 4% found it dirty (5% in 2018). There were several general complaints about the cleanliness of the ladies' toilets, possibly prompted by the existence of this question.

**Q27 Please share any other comments that can help us to improve the service that we offer to you.**

Open question with 366 answers separately analysed. The general tone of the responses is similar to that in previous years: there are a lot of complaints, some potentially serious, but also a good deal of praise for the staff and the services provided, as well as recognition of the operational problems that they face. There is still a high proportion of complaints about various aspects of access but the overall impression is that dissatisfaction levels have not changed a great deal. Some comments suggest, as before, that patients have experienced poor service and quality of care from the practice but it is often difficult to know from the descriptions what went

wrong and whether the complaints were the results of one-off bad experiences or something more general. Complaints about standards of clinical care generally remain uncommon and one or two patients recorded how well they had been looked after by the practice.

**Q24 How old are you?**

80% (66% in 2018) of respondents were in the 25-64 age group ie they were of potentially working age (59% said they were in full-time employment, compared with 54% in 2018). 2.5% were under 24 and 0.2% under 18, while 15% (15% in 2018) were 65 and over. As already noted, this does not accurately reflect the heaviest users (the very young and the very old) but explains the number of requests for early morning, evening and Saturday morning appointments.

**Q25 Are you: in full-time employment; part-time; unemployed; homekeeper; retired; student; or long term sick?**

The proportion in full-time employment (59%) was higher than the 54% in 2018, possibly because of the higher proportion of Riverside patients of working age and in work. There were 12% in part-time work, 4% unemployed, 2% students and 5% long-term sick (8% in 2018) but it is hard to assess the accuracy of these figures as the numbers are fairly small.

**Q26 Which ethnic group do you belong to?**

46% (48% in 2018) were White British, 13% Black African and/or Black Caribbean or Black British, 27% White European or White Other (compared with 14% for the Hurley in 2018) and 9% 'other' or preferred not to say. These results vary from year to year but in general are fairly close to the ethnic profile for the area.