

Wargrave Surgery PPG Questionnaire – September 2020

Introduction

This questionnaire was designed in close collaboration with the practice by the Patient Participation Group (PPG) It was distributed for the first time by the IT department of **Pursuit International Ltd**, a company linked to the PPG chair, Andrew Ferguson, using the PPG's patient reference group database.

The questionnaire was in two parts:

The first part related to patient's experiences of the changes imposed on the practice by the pandemic and possible options for future ways of working.

The second part looked at patients experiences of some external issues related to the pandemic.

Some interim findings were discussed with the practice during a virtual meeting on Sept 21st. The Survey closed on Sept 25th with 393 responses from a mailing list of 1678 (23.4%) We are grateful to all respondents for completing the survey and hope that you find this report of interest.

Respondents

The age and gender of participants is shown in the table below. 54 respondents (13.7%) chose not to complete this section. This is why some of the figures in the analyses do not correlate with the 393 participants. 47.5% of respondents were 65 or over and this reflects to some extent the early history of the PPG reference group when names and contact details were collected from patients exiting the surgery on flu day.

We do not collect or store people's ages or dates of birth in the patient database so we cannot comment on the compliance rates of different age groups.

Age range	Male	Female	Total	%
18-24	1	5	6	1.8%
25-34	2	17	19	5.6%
35-50	14	49	63	18.6%
50-65	33	57	90	26.5%
65-79	56	64	120	35.4%
80 +	23	18	41	12.1%
Total	129	210	339	100.0%

Methods

Some early ideas for the content of the questionnaire, focussing mainly on the response to the pandemic were discussed with representatives of the practice at a meeting with Andy Ferguson on August 24th and a number of additional questions were suggested.

The revised questionnaire was then adapted to comply with the logic requirements of Survey Monkey and tested by members of the PPG.

Previous questionnaires had been sent out via a standard internet service provider in batches of 50 at hourly intervals in order to avoid the risk of suspension of service. On this

occasion the IT department referred to above were able to handle batches of 500 at a time thus eliminating the previous intensive 2 day mailing out exercise.

The responses have been analysed using the comprehensive analysis tools provided within Survey Monkey.

Summary of findings

Part 1

- 1) 88% of respondents thought that the practice had responded well to Coronavirus
- 2) Most people (89%) that had requested a GP appointment got an initial phone call back and 56% of them went on to have a face to face appointment.
- 3) 78% of respondents were happy with the outcome of their initial request for an appointment. However for women this was 71% and men 85%
- 4) 85% of patients felt that they were made to feel welcome at the practice A number of those that disagreed mentioned their perceptions of their interactions with reception staff. . There were broadly twice as many specific critical comments as positive ones.
- 5) 78% of respondents rated the practice as efficient or better over this period with women at 71% and men at 89%.
- 6) Most people were oblivious of the new phone system at the practice. There were favourable comments about the ability to be put on hold rather than having to re-dial but adverse comments about the inability to book appointments in advance.
- 7) 72% of respondents were comfortable with continuing the practice of GPs making an initial phone call prior to arranging a face to face appointment– 67% of women and 81% of men. This was broadly consistent across age groups.
- 8) Irrespective of gender, 84% of respondents felt it was important to know when to expect a call. For over 65s it was 79%, for 35 to 65 year olds 89% and under 35s 84%
- 9) 61% of respondents would prefer a call back from the GP within a two hour slot or less with over 65s at 53%, 35 to 65s at 66% and under 35s at 80%
Younger groups under 35 had a stronger preference (30%) for a one-hour slot than older groups over 65 at 15%.
- 10) 69% indicated that they would continue to request initial appointments by phone though 24% would prefer to use e-mail or the practice website with younger groups at 31% and older groups at 17%
- 11) 45% would like the GP to then phone them back and 11% would prefer a video call back with just 38% expressing a preference for a face to face appointment straight away. Face to face appointments were the preference for older people, 65 and over, at 45% compared to younger groups under 65 at 31%
- 12) 52% had a flu vaccine last year but 84% said they would have one this year. Only one person declared as anti-vaccine though five felt that they had experienced reactions to previous jabs.
- 13) Only 24% of respondents had no interest in health seminars. There was a very wide range of areas of interest headed by diet and nutrition and heart health.

Part 2

- 14) 92% of respondents agreed to answer the optional questions about Covid 19
- 15) Only 13 of the 305 who responded said that they wouldn't attend the Royal Berkshire Hospital if referred there for treatment. Higher rates have been recorded by the Trust.

- 16) Only 17% would have changed their mind if they and their family unit had been asked to isolate for 48 hours prior to arrival.
- 17) Only 13 people were notified that their elective operation or treatment had been cancelled. Only one individual reported serious consequences as a result.
- 18) An astonishing 25% of respondents believed that they, or someone in their family had already contracted Covid though only 4 of these had been confirmed by a test.
- 19) 45 people had tried to access a Covid 19 test and most had succeeded. 21 people reported that the process was easy and straightforward but 8 said that it was either slow or that they had never been informed of the result.
- 20) 52% of respondents felt that there had been no significant impact on their mental and physical health and 13% felt there had actually been an improvement
- 21) One individual referred to the enduring after effects of the disease (otherwise known by the generic name of Long Covid) and bemoaned the lack of recognition and treatment.
- 22) As well as frustration (11%), people reported anxiety (9%), depression (6%) and loneliness (5%)
- 23) 29% of respondents had received some help from neighbours and friends and 47% had provided help.

Recommendations

Based on the evidence contained in this survey, the PPG would make the following recommendations:-

- 1) Customer service training is required for receptionists.
- 2) **Where GPs are making telephone call backs these should be within a specified two hour period.**
- 3) **Regular health seminars should be trialled.**
- 4) **The surgery should be prepared for increased demand for flu jabs (and covid-19 vaccines when they become available).**
- 5) **A focus should be put on efficiently completing the transfer to the new online patient platform and the community should be encouraged to use the website and online services.**

Practice response to the recommendations

We extend our thanks to the PPG and to Tony Lloyd in particular for their efforts with the survey and the analysis of the results and resulting suggestions.

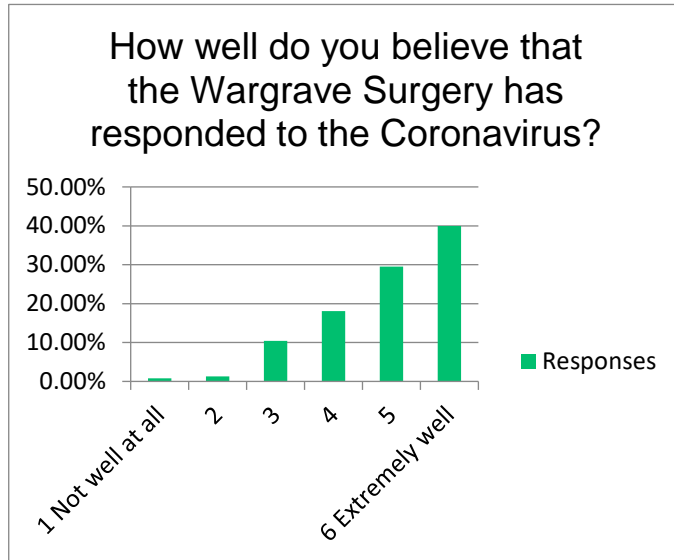
1. **We want the surgery to be seen as providing an excellent service and are going to run a training program for the reception team. We hope patients will notice improvements in the weeks and months ahead.**
2. **We try to deal with the most urgent clinical problems early in the day, while giving lower priority for more routine issues. However, the survey does highlight that younger patients have busy schedules, so reception will try and ascertain when**

patients are available for a call back so we can do our best to phone at appropriate times.

- 3. We are already putting together the first of our health seminars on healthy diets and nutrition to take place early next year.**
- 4. Our first socially distanced Saturday flu clinic was on 19 September where we immunized 872 patients in 4 hours. Influenza vaccines are ordered based on the uptake the previous year – therefore our order was in line with the numbers in 2019. The unpredictability of the pandemic and the government control of vaccine stocks has meant that we must await news of further supplies. We will immunize as many patients as we can when our allocation can be accessed.**
- 5. Our computer system was changed to bring it in line with that used by other local surgeries. We were reluctant in many respects to make that change as it causes problems for clinicians such as Dr. Puddy who used the previous system for 30 years. However it does save the local health service (CCG) a lot of money and we do benefit from all surgeries in the area using the same system. It has meant considerable upheaval and extra work – and resulted in patients having to re-register for patient access. Everyone at the surgery has worked hard to help patients make this change and we would encourage patients to get in touch with the team if there are any problems.**

Wargrave Surgery response to the pandemic

Question 1 How well do you believe that the Wargrave Surgery has responded to the Coronavirus?



Choices	Responses	
1 Not well at all	0.76%	3
1 Not very well	1.27%	5
3 Not well	10.43%	41
4 Well	18.07%	71
5 Very well	29.52%	116
6 Extremely well	39.95%	157
	Answered	393

344 (87.5%) of the 393 responses felt that the practice had responded well to the pandemic. That leaves a significant minority (49) who were less impressed of which 26 were women, 12 were men and 11 refused to disclose their gender.

There was some criticism of the survey at this point from some reference group members who had not interacted with the practice in the last six months and were unable to answer this compulsory question and as a consequence were unable to proceed with the rest of the questionnaire.

Initial contact with the surgery in the last 5 months

Questions 2 to 10 Latest initial contact with the Surgery

We asked whether respondents had requested a GP appointment in the last 5 months. 217 (56.5%) of those responding had done so.

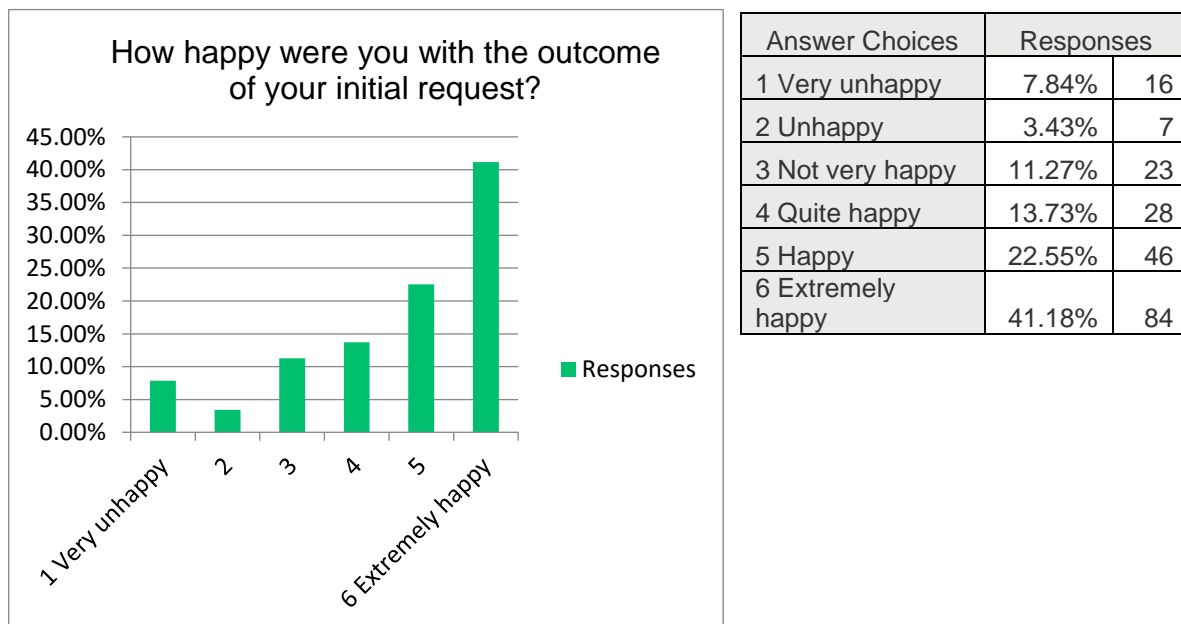
The majority 196 (91.6%) of 214 had done this by phone though 9 had either done this by e-mail, letter or by attending the practice.

148 (72.6%) of 204 had got an appointment with a GP and 49 were referred to another healthcare professional.

133 (89.3%) of 149 of those GP appointments were conducted by phone though 13 were immediately face to face.

75 of these initial phone call appointments with a GP resulted in a subsequent face to face appointment.

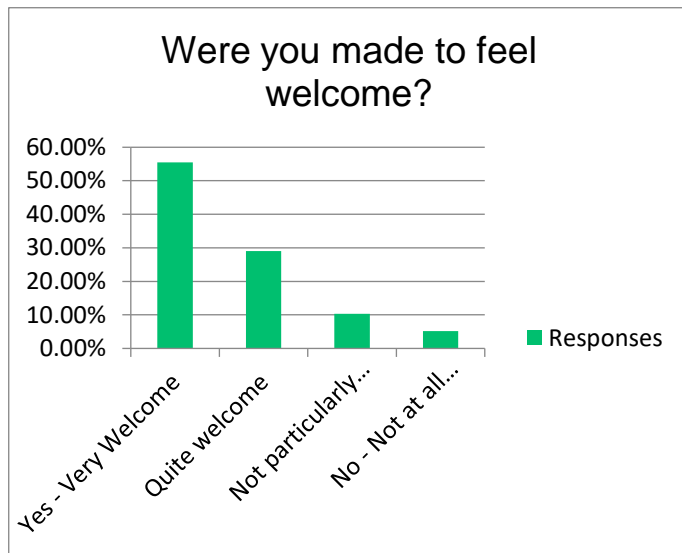
The graph below shows that 158 (77.5%) of 204 respondents were happy with the outcome of their initial request for an appointment while 16 (7.8%) were very unhappy



Welcome received at the surgery

Question 11 Were you made to feel welcome?

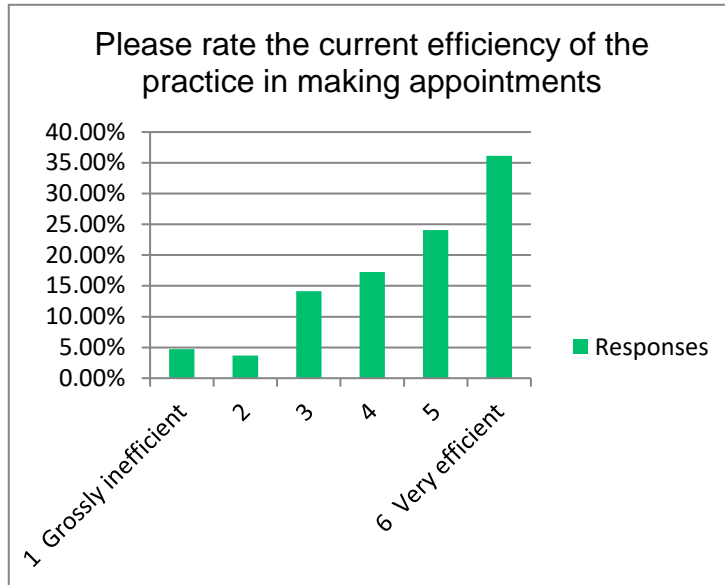
It is encouraging that 84.5% of respondents felt welcome or quite welcome. However there were more than 30 less encouraging responses. A number of people mentioned their perceptions of their interactions with the receptionists. There were broadly twice as many specific critical comments as positive ones.



Answer Choices	Responses	
Yes - Very Welcome	55.44%	107
Quite welcome	29.02%	56
Not particularly welcome	10.36%	20
No - Not at all welcome	5.18%	10
	Answered	193

Efficiency

Question 13 asked about the recent efficiency of the practice in making appointments



Answer Choices	Responses	
1 Grossly inefficient	4.71%	9
2 Inefficient	3.66%	7
3 Not very efficient	14.14%	27
4 Quite efficient	17.28%	33
5 Efficient	24.08%	46
6 Very efficient	36.13%	69
	Answered	191

77.5% of respondents rated the practice as efficient or better over this period with women at 71.4% and men at 88.9%.

New telephone system

Question 14 asked for people's comments on the new telephone system at the surgery.

There were 232 meaningful responses to this question

33 hadn't used it. One person seemed very enthusiastic and 40 seemed moderately positive
158 felt there was no difference

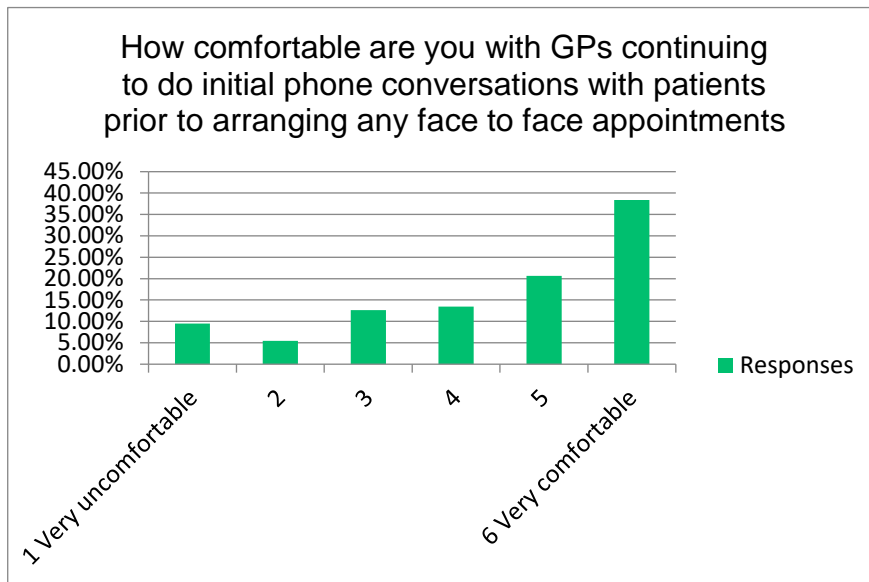
Typical comments are set out below but the main positive was that you could now wait on hold and the main negative was that you couldn't book in advance

- 1) Overall, the telephone system is VERY much improved. At least you don't have to keep hanging up and trying again and again and again. However, sometimes there are obviously not enough staff managing the phones and you can still be kept waiting. However, it is better than having to keep re-dialling,
- 2) The system is fine, the new receptionist not!! I have tried on two occasions to make an appointment for my daughter (who is a teacher, and therefore a key worker) and have asked for a call from doctor. When I explained that she cannot speak until after 4pm and asked if the call could please be requested for after then, I was told abruptly that no, the doctor would call whenever it suited them and if she missed it, she missed it! I really think that is showing no actual understanding of what a teacher (especially currently) is trying to do. She cannot have her phone on during the school day.
- 3) It's just really hard to get through in the morning and you end up missing out on an appointment, I feel like people that are busy with their kids in the mornings and can't keep calling don't have much of a chance to get an appointment.

- 4) It's rubbish, you listen to a 2 min talk about COVID and how you can't come to the surgery?
Miss the window to make an appointment everyone knows this and they can mention it if they feel the persons symptoms are COVID related!

Future arrangements

Question 15 was about the possible continuation of the practice of GPs having initial phone conversations prior to arranging any face to face meeting



Answer Choices	Responses	
1 Very uncomfortable	9.46%	33
2 Uncomfortable	5.44%	19
3 Not very comfortable	12.61%	44
4 Fairly comfortable	13.47%	47
5 Comfortable	20.63%	72
6 Very comfortable	38.40%	134
	Answered	349

72% of respondents were comfortable with continuing the practice of GPs making an initial phone call prior to arranging a face to face appointment– 67% of women and 81% of men. 72% was broadly consistent across age groups

Timings of calls from the GP

Question 16 then asked how important it was to know when to expect a call from the GP?

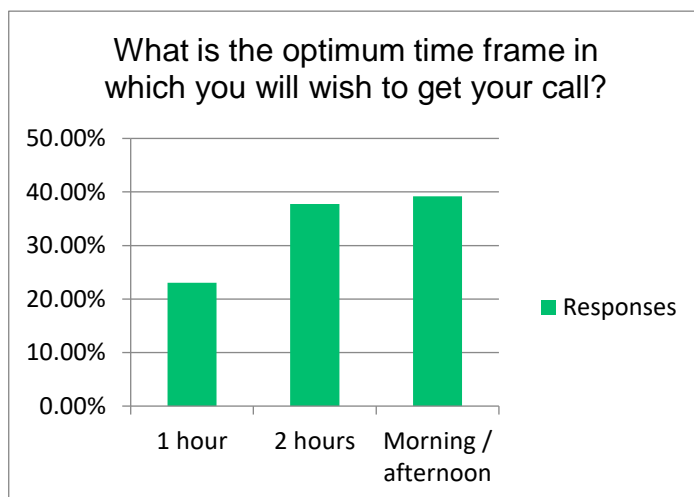


Answer Choices	Responses	
1 Not important	3.44%	12
2 Not very important	3.72%	13
3 Quite unimportant	8.88%	31
4 Quite important	24.64%	86
5 Important	28.94%	101
6 Extremely important	30.37%	106
	Answered	349

Irrespective of gender, 84% of respondents felt it was important to know when to expect a call. For over 65s it was 79%, for 35 to 65 year olds 89% and under 35s 84%

Time Frame

Question 17 then asked about the optimum time frame in which people would like to be told to expect a call i.e. within an hour, within two hours or morning / afternoon.



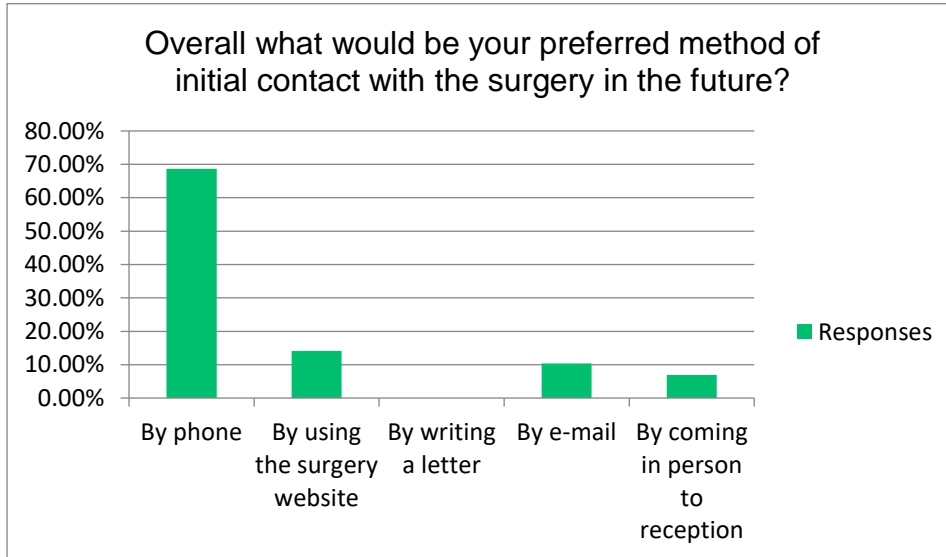
Answer Choices	Responses	
1 hour	23.05%	80
2 hours	37.75%	131
Morning / afternoon	39.19%	136
	Answered	347

61% of respondents would prefer a call back from the GP within a two hour slot or less with over 65s at 53%, 35 to 65s at 66% and under 35s at 80%

Younger groups under 35 had a stronger preference (30%) for a one-hour slot than older groups over 65 at 15%.

Initial contact with the practice in the Future

Question 18 then asked respondents what would be their preferred method of initial contact with the surgery in the future?

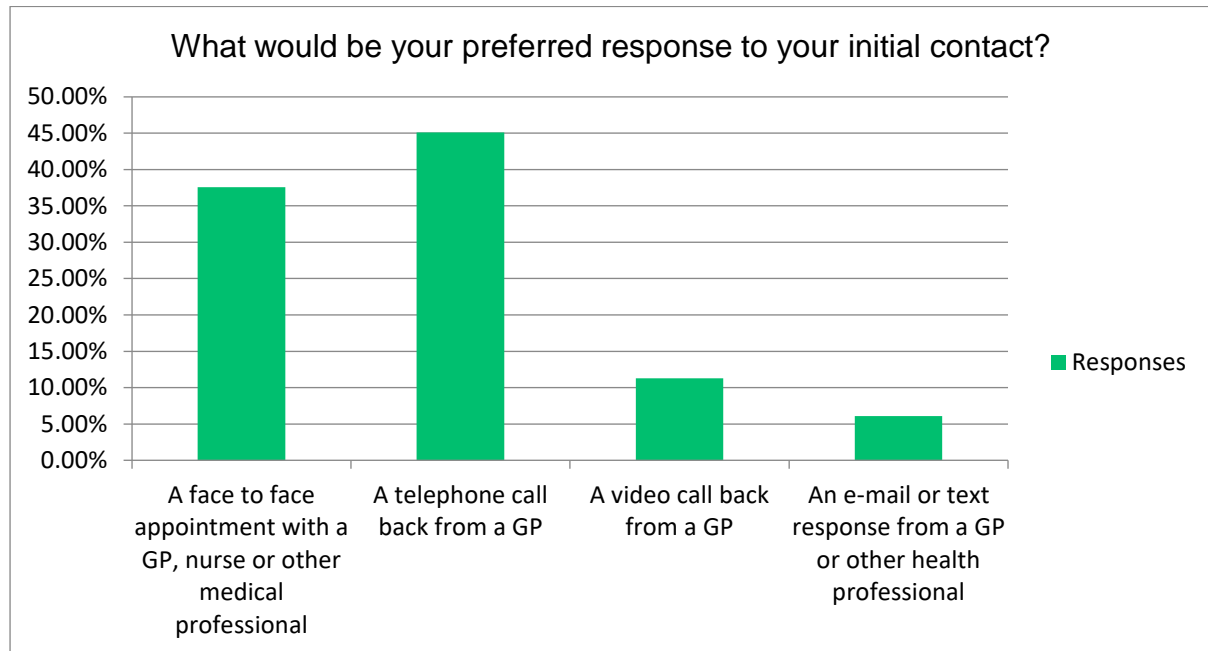


Answer Choices	Responses	
By phone	68.68%	239
By using the surgery website	14.08%	49
By writing a letter	0.00%	0
By e-mail	10.34%	36
By coming in person to reception	6.90%	24
	Answered	348

The vast majority expressed a preference to use the phone though a quarter would now prefer to do this digitally. Younger groups <65 would tend to prefer a digital method (website or e-mail) 31% compared to older groups >65 17%

Future response to the initial call

Question 19 then asked what the preferred response from the practice would be after the initial call to reception and, of course, it is acknowledged that this depends on what the patient was concerned about at the time.



Answer Choices	Responses	
A face to face appointment with a GP, nurse or other medical professional	37.57%	130
A telephone call back from a GP	45.09%	156
A video call back from a GP	11.27%	39
An e-mail or text response from a GP or other health professional	6.07%	21
	Answered	346

Although 83% would prefer either a traditional face to face appointment or a phone call, 11% would prefer a video call despite the fact that few have ever been offered by the practice. 45% actually said they would prefer a phone call back from their GP which may reflect on recent experience.

Face to face appointments were the preference for older people >65 at 45% compared to younger groups <65 at 31%

Flu Jabs

Questions 20 and 21 asked about people's intentions to have a flu jab this year in comparison to last year

52% of those responding had one last year but 84% said they would have one this year.

for. 34 people responded to the question about why they weren't having a flu jab this year

Only one person said that they don't trust vaccines.

Five believed they had experienced reactions to a previous flu injection

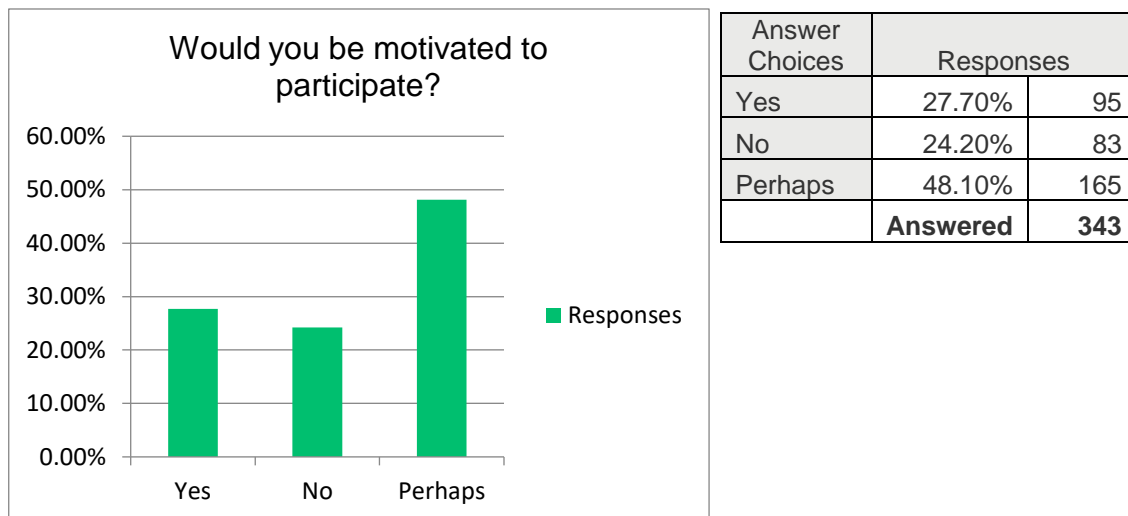
Four didn't think they worked and

One didn't like injections of any sort.

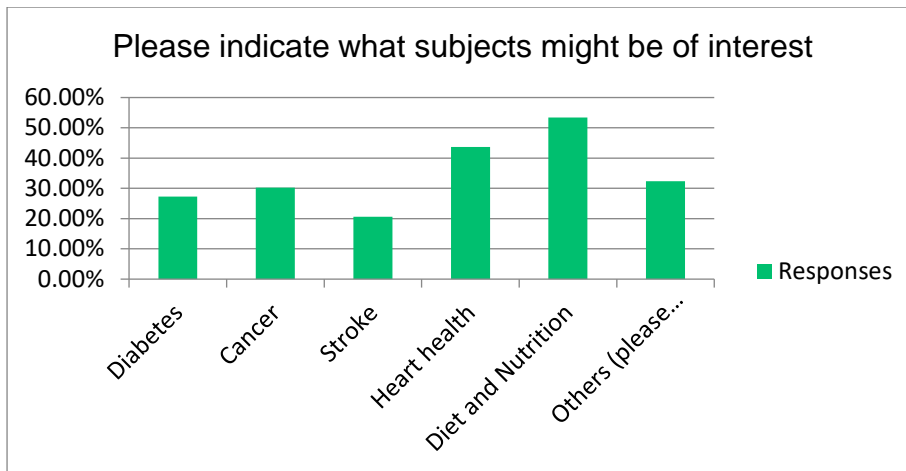
The remainder didn't think they needed one or didn't think they were eligible to have one.

Health seminars

Question 22 asked whether patients would be motivated to attend some short interactive health seminars delivered by a GP or a consultant on specific subjects that, for the time being, would be accessible via a laptop iPad etc.



The responses appear to indicate a warm if cautious response to the proposal. The more popular subjects were diet and nutrition (53.6% - 127 of 238) and heart health (43.7% 104 of 238). See the table below:-



Answer Choices	Responses	
Diabetes	27.31%	65
Cancer	30.25%	72
Stroke	20.59%	49
Heart health	43.70%	104
Diet and Nutrition	53.36%	127
Others (please specify)	32.35%	77
	Answered	238

There were 49 other suggestions

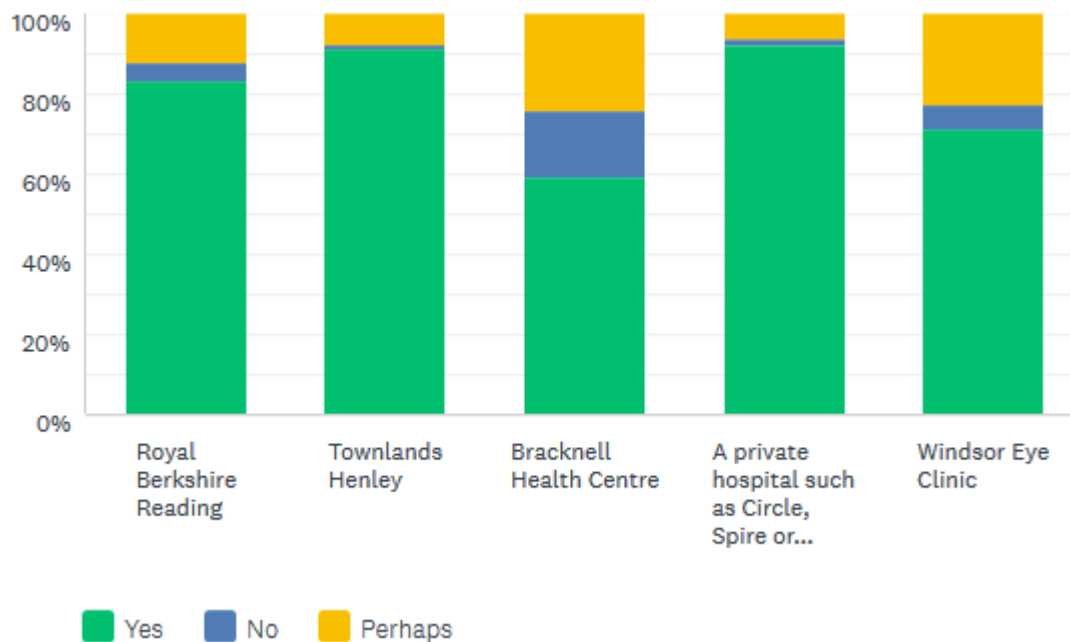
Optional Questions about Covid 19

We gave people the option of answering these questions and 310 of the 338 that had completed the survey up to this point agreed to proceed

Hospital appointments

Questions 27 to 33 covered attendance at hospital in the last 5 months and cancelled procedures

Question 28 was prompted by reports that many people referred to local hospitals over the last 5 months were too scared to attend and asked whether respondents would be prepared to attend certain local hospitals if referred.



It was reassuring to note that only 13 of the 305 who responded to the Royal Berkshire hospital question would not have been prepared to attend. Curiously only 4 of the 288 that responded to the same question about the local private hospitals would have turned down the referral. The Bracknell Health Centre was also unpopular with 44 of 263 saying they would refuse a referral but that may well be because of the perceived difficulty in getting there.

Question 29 asked respondents what they would have done if they had been asked to socially isolate for 72 hrs with their family unit. 75% of respondents wouldn't have changed their mind but 17% would have been less likely to go.

We were aware that a number of elective operations had been cancelled or deferred and asked respondents if this had happened to them and what impact this had on them. Question 30 to 33 revealed that only 13 people had been affected by this and that only one

individual had reported serious consequences and potential harm as a result.

Covid 19 prevalence in the community

Question 34 to 36 asked “Do you think you or someone else in your family might have had Covid?”

25% (77 of 308) of those that responded thought that they, or someone else in their family might have had Covid 19 already but only 4 of the 77 had been confirmed by a test.

Covid testing

Questions 37 to 40 asked whether people had tried to access a Covid test.

45 of 306 had. Mainly in July (7) and August (21) and all but one had managed to get one. 21 comments stated that the process was easy and straight forward and 8 had said it was either slow or that they had never been informed of the result. Two reported being directed to Ebbw Vale for a test

Impact on mental and physical health

Question 41 then asked about the impact of the lockdown on peoples mental and physical health.

There was a very good response to this question with 283 responses. Although the analysis is inevitably impacted by subjectivity, the majority (52%) of respondents felt that there was no significant impact or even an improvement (13%)

Concerns mentioned by respondents were Frustration (11%), Anxiety (9%), Depression (6%), Mental Health issues (6%), Loneliness (5%), Weight gain (5%) and General Health issues (5%). 4% of respondents referred to the benefit of having a garden. Other factors were increased stress (3%), increased alcohol consumption (2%), lack of exercise (2%) and motivation (1%). Hardly anybody mentioned the adverse affect on childrens education.

One individual referred to the fatigue related to the after effects of the disease otherwise known by the generic name of Long Covid and bemoaned the lack of recognition and treatment.

Community Support

Finally questions 42 to 45 asked about community support during the lockdown and afterwards.

29% of respondents had received some help from neighbours and friends and 47% had provided help.

81 people responded to the request to provide details of the help offered or received of which 43 referred specifically to groceries, particularly in the early phases of lockdown and 23 mentioned help with accessing medications. Neighbours were referred to by 31 respondents but family or family members on just 6 occasions. There were 21 references to local community groups providing shopping support sometimes using whats app and other digital tools

134 people responded to the request to provide details of the support that they had given to others during the lockdown. Help with shopping, medications etc. was given to 47 neighbours, 36 family members, 31 unspecified friends or local people. 20 people had joined organised support groups and 8 had contributed in other ways such as being an NHS responder, making masks or helping with food banks.

