NHS Rotherham Clinical Commissioning Group

Primary Care Sub Group – 25 September 2019

Primary Care Committee – 9 October 2019

Local Enhanced Services (LES) Survey report – 2019-20

Lead Executive:	Chris Edwards, Chief Officer
Lead Officer:	Julie Murphy, Senior Contract & Service Improvement Officer (Primary Care)
Lead GP:	Dr Avanthi Gunasekera, SCE GP Lead for Primary Care

Purpose:

As part of the Local Enhanced Services (LES) Specifications rolling patient satisfaction surveys have been set up for each LES. Surveys are monitored on a quarterly basis and reported to PCC for noting.

Background:

All existing and new Local Enhanced Service (LES) specifications in the basket of services, i.e. those with 75% sign up, have patient satisfaction surveys in place to record patient satisfaction with each LES accessed.

GP practices have been asked to provide patients attending each LES service with the appropriate link for completion. For those patients who do not have access to relevant digital technology, the practices have been advised to print the survey questions off and pass to the patient for completion and return, responses would then be recorded by the practice via the survey link.

The survey questions were agreed with the Public and Patient Engagement Manager and the Clinical Lead prior to publication.

Delegation responsibility

Please tick which area of delegated responsibility this paper covers:

Commissioning, procurement and management of GMS, PMS and APMS	
contracts including taking contractual action	
Newly designed enhanced services (including DES)	
Local incentive schemes	
Discretionary payments	
Commissioning urgent care for out of area registered patients	
Planning Primary medical care services (PMCS)	
Managing practices with CQC concerns	
Decisions on premise cost directions	
Planning the commissioning of PMCS	
Manage the delegated allocation for commissioning of PMCS	
Assurance to the governing body on the quality and safety of PMCS	



Analysis of key issues and of risks

Rotherham CCG has ten local enhanced services which are in the basket of services and have patient satisfaction surveys in place.

Over the period 2 April 2019 to 13 September 2019 the CCG has received 506 responses provided by patients attending 8 out of 30 practices (see appendix 1 for graphs).

Below is a list of services and the number of responses received for each survey:-

- Anticoagulation 64
- Aural Care 55
- Carcinoembryonic Antigen Monitoring (CEA) 0
- Minor Surgery 9
- Phlebotomy 357
- Prostate Specific Antigen Monitoring (PSA) 2
- Ring Pessary 6
- Shared Care Drugs 7
- Suture removal 6
- Transgender 0

Each survey asked patients a standard set of questions to ensure consistency:

- 1. Please tell us the name of your practice
- 2. Did your practice explain the reason for your appointment at this service?
 - a. Yes
 - b. No
- 3. Were you satisfied with the treatment your received at the appointment?
 - a. Very Satisfied
 - b. Satisfied
 - c. Dissatisfied
 - d. Very Dissatisfied
- 4. Please use the box below if you would like to make any other comments about the service you received.

Overall satisfaction rates reported by patients as below:-

- Very Satisfied 81%
- Satisfied 15%
- Dissatisfied 1%
- Very Dissatisfied 1%
- Level of satisfaction not indicated 2%

The main theme taken from the feedback in relation to Dissatisfied and Very Dissatisfied related to training within Phlebotomy at the practice.

The main theme taken from the feedback in relation to Very Satisfied and Satisfied, indicates an excellent / satisfactory service had been received and that staff are friendly and provided re-assurance.



Did the practice explain the reason for patient's appointment with the service:-

- Yes 93%
- No 5%
- Did not answer 2%

As the surveys have been in place for the last 6 months the Primary Care Team will continue to monitor, with a paper to Primary Care Committee on a quarterly basis. The team will follow up with practices where no responses have been received, and obtain assurance that the surveys have been provided to patients.

Patient, Public and Stakeholder Involvement:

GP LES specifications are developed in conjunction with the LMC

Equality Impact:

N/A

Financial Implications:

N/A

Human Resource Implications:

N/A

Procurement Advice:

N/A

Data Protection Impact Assessment

N/A

Approval history:

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Recommendations:

The Primary Care Committee is asked to note the paper and the next steps.

- I. Primary Care Team to continue to monitor and provide a paper to Primary Care Committee on a quarterly basis.
- II. Follow up with practices where no responses had been received.
- III. Obtain assurance that the surveys had been provided to the patient.

Paper is for Noting









