ThriveGP Survey 2023

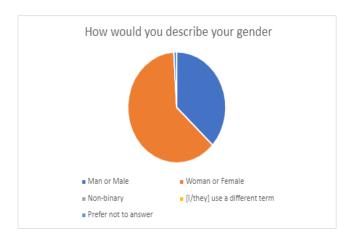
This survey was conducted by asking patients seated in the waiting room to fill out this document anonymously. Please note that we advised patients that if they did not feel comfortable to answer any or some questions that it is not mandatory. As a practice we prioritize making sure that patients have a relaxing and comfortable experience in the waiting room.

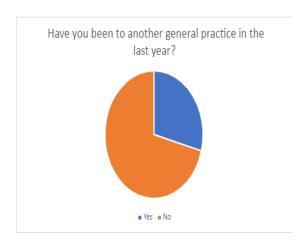
This survey brought to light not only issues but the successes within the practice. These successes should be continued whilst also working on improving areas where patients have highlighted.

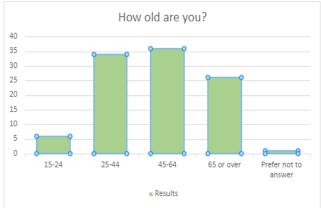
This survey was provided by the RACGP and was obtained from their "Tool Kit". This approved survey highlights the overarching areas of the practice. For future research we aim to evaluate the isolated areas of the practice, such as individuals receiving Health Assessments, as a means of Quality Improvement.

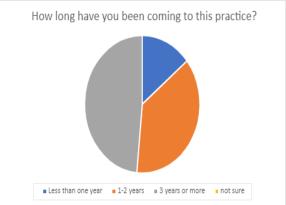
Ethically, this survey was anonymous in an uncontrolled environment with no pressure to complete it. Consent was given verbally, and information about the survey was provided on the first page as well as through our admin staff. There were no identified risks, as the questions were deemed to not cause distress. Therefore, beneficence was identified quite easily. Our staff were directly informed that integrity should be maintained by being entirely truthful for the purpose of this survey. By understanding what this survey results may mean and the impact it could have on individuals and community, our practice can grow and benefit. This data should only be shared in a way that maintains anonymity of the patients. Throughout the entirety of this process our staff have maintained privacy for the people involved by keeping the identity of individuals anonymous, including not looking at answers when handed back.

Demographics







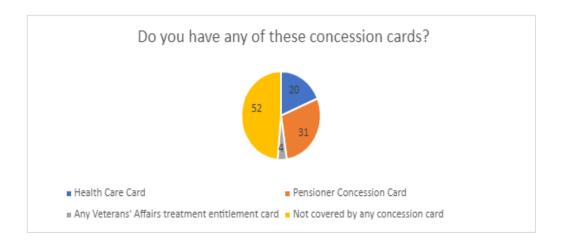


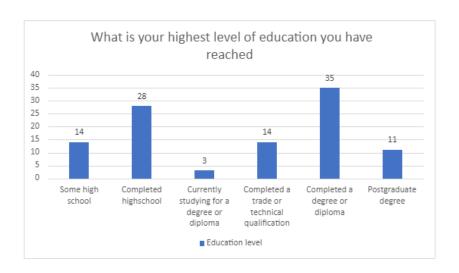






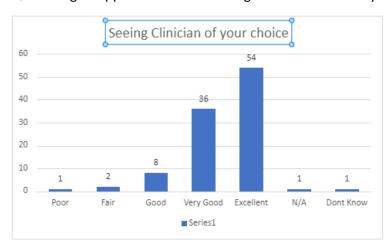




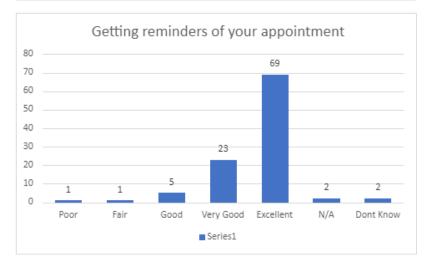


Access and availability

Q1 Making an appointment and waiting to see a clinician at your last visit





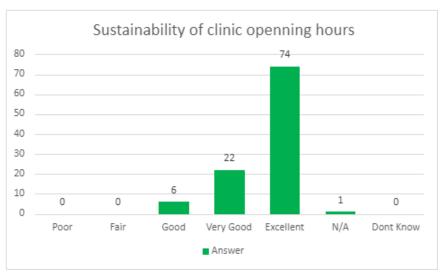


Communication and interpersonal skills of administrative staff

Q2. Your experience with reception staff at your last visit?

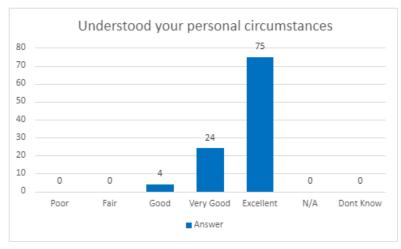


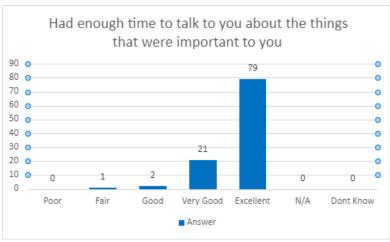


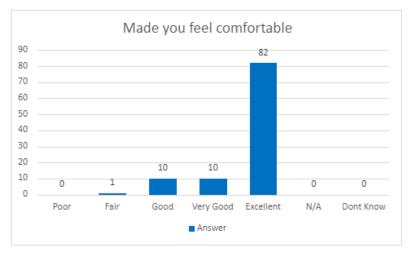


Communication and interpersonal skills of clinical staff

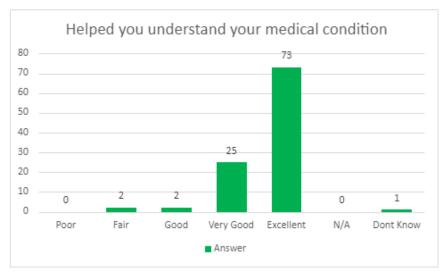
Q3 Your experience of the interpersonal skills of the clinician at your last visit



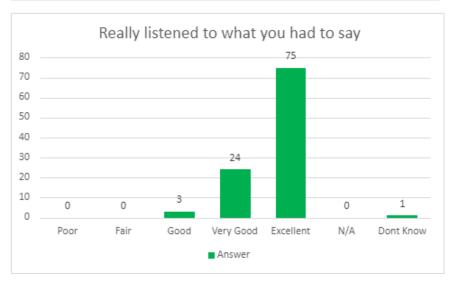




Q4 Your experience of the way clinicians communicated with you at your last visit

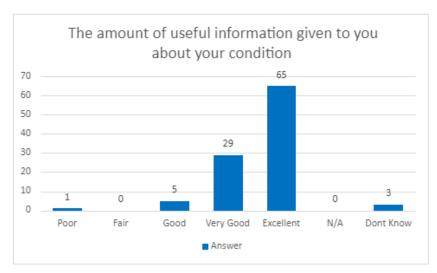


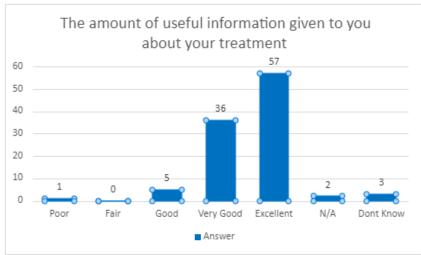


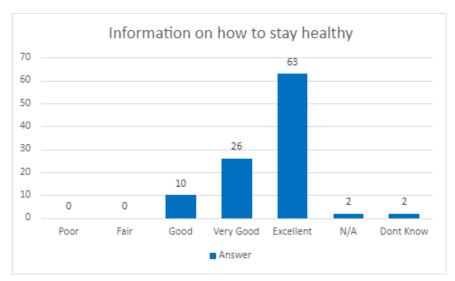


Provision of information

Q5 Your experience of the information given to you by clinicians at your last visit

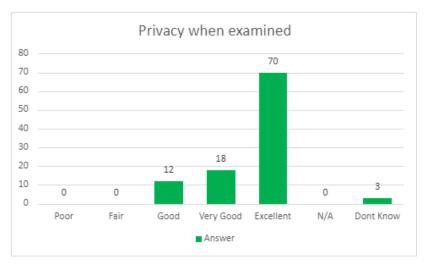


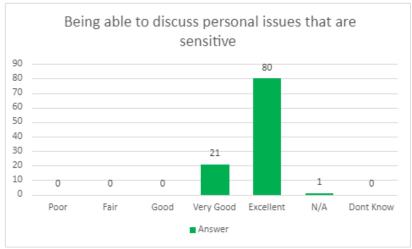


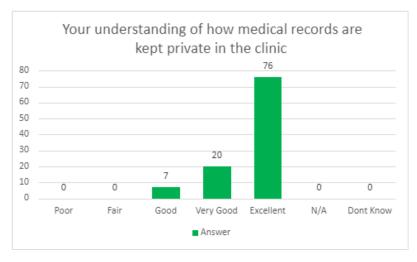


Privacy and confidentiality

Q 6 Your experience of privacy at your last visit



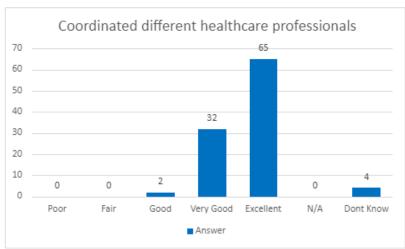


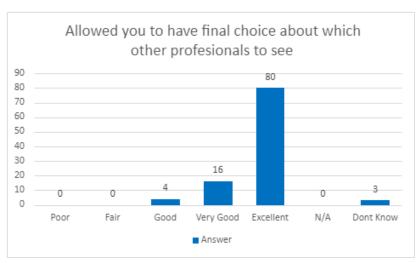


Continuity of care

Q7 Your experience of the way your clinician worked with other healthcare professionals at your last visit

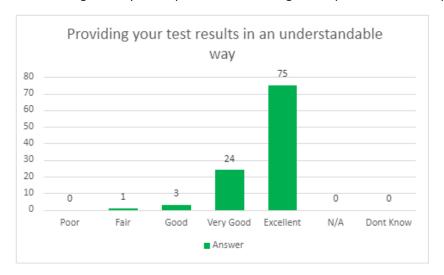


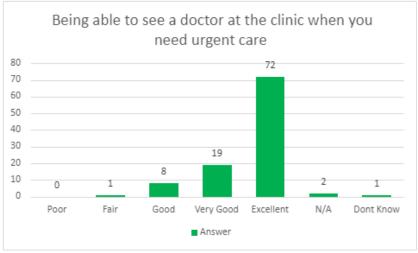


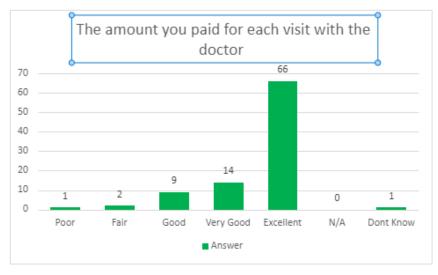


Experience over the last year

Q8 Thinking about your experience with the general practice over the past year







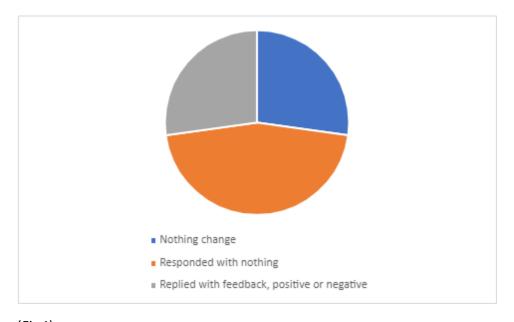
Open Ended Questions

Q9 If you could change one thing about this practice, what would you change?

Overall, the feedback from patients in question 9 was positive (see fig 1). There were several remarks made that were sarcastic or unachievable. A few examples are "Clone Lisa (Dr Opie)", or "Move the practice closer to home". Though these are quite unachievable examples it provides an insight into patients' view of the doctors. These responses have been added to related topics such as availability of doctors and patient wellbeing within a rural area.

Patient Feedback	Action taken
"More understanding re: women's	This response we saw to be incredibly significant as at Thrive we
health, Perimenopause,	expect that all patients would receive the highest care. This has
menopause and it's varieties"	been brought up with clinical staff. Education will be
	implemented in the new year, focusing on women's health
"Different music", "Music too	There were several comments about the loudness of the music,
loud"	this is something we have been actively working on in the last
	few weeks. A new consultation room is being used in which is
	closer than other rooms to the waiting room. Providing privacy
	to the patients in this room is essential. However, patients in the
	waiting room need to be accommodated as well. New policy
	such as only one person (practice manager or lead admin) to be
	connected at any given point.
"No masks"	This feedback was given whilst we required masks to be worn.
	This policy has been changed, not directly due to patient
	feedback. However, it did play a role in the removal of the mask
	policy.
"A male doctor"	Whilst when this survey was filled there were 2 male doctors,
	they are only available for limited times each. Since the
	completion of this survey the practice has since welcomed a
	male doctor who is fulltime. We hope this accommodates
	people who feel more comfortable with a male doctor.
"Having to pay"	Thrive GP is a private billing practice, and according to RACGP
	guidelines we have appropriate signage advising this as well.
	Our admin team informs every patient that there will be a
	charge. ThriveGP understands that this is not ideal for everyone
	and where appropriate Bulk billing can be given, but this is with
	the Doctors' discretion.
"How the desks are arranged in	We have never received this feedback before, and we feel it is
the rooms for more of ease of	important to act on this fast. In our next Staff meeting, we hope
access"	to discuss with the clinical team any feedback they received
	regarding desk arrangement. It is our responsibility to attempt
	to make arrangements that best suit all patients.
"Availability of doctors",	Thrive has recently employed another doctor, meaning our
	practice now employs 3 full-time doctors and 2 nurses. We hope
	that with this extra doctor a patient's preferred doctors will
	become more available.

"Being able to get the kids in when really important instead of being sent to the hospital"	This is a situation that we see quite often within our practice. Our protocol insists that sick children be triaged by a nurse. This nurse will then make appropriate choices based on medication and equipment we have available. We understand that this situation is stressful for any parent. The action we have taken is to ensure that all staff effectively communicate with patients/carers about why this is the best option.
"Text reminders"	We do offer this service through our Patient engagement platform HotDocs. However, we are in the process of creating a new document to hand out to patients to educate them on this platform. Hopefully better engaging them"
"Opening hours to Saturday, even	We have brought this suggestion to clinical and admin staff
½ a day"	attention to discuss in future.
"Being locked out"	We believe this patient is talking about the front door being locked. This was implemented through the COVID-19 pandemic as a means of stopping overcrowding and infection. We have brought this to the attention of clinical staff but do not intend to alter this policy at this stage.



(Fig 1)
Action taken for the entirety of the report:

By looking at the overwhelming positive feedback we've received, we have had to establish a critical perspective of these results. Though every question had a mode of excellent, we need to look at the distribution of the answers, and further consider the areas where some patients had concerns.

For this table we have established any questions scoring below 70/103 excellent answers. The numbers indicated in the table are the number of excellent answers.

Question	Action taken	
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Ease of Parking (51)	There is no immediate indication as to why this score is lower
	than the average. As a team we aim to investigate and acquire
	more patient feedback.
Getting reminders for your	We have endeavored to create a new document that will
appointment (69)	assist patients with our HotDocs appointment assistant
Seeing clinician of your	We are improving in asking patients their preferred doctor; as
choice (54)	a new doctor is added, we hope to accommodate people.
The amount of useful	Our clinical staff have been notified and will discuss this
information given to you	further in the next clinical meeting.
about your condition (65)	
The amount of useful	Our clinical staff have been notified and will investigate this
information given to you	further in the next clinical meeting.
about your treatment (57)	
Information on how to stay	Our clinical staff have been notified and will investigate this
healthy (63)	further in the next clinical meeting.
Coordinated different	Our clinical staff have been notified and will investigate this
healthcare professionals	further in the next clinical meeting.
(65)	