

PATIENT SURVEY 2009 – Interim Information to all GPs from GPC

Background

The GP patient survey was established in England in 2006/07 to support PCT assessment of general practices' achievements against national standards set out in DES agreements. These agreements linked results from the administered surveys with the rewards made to GP practices.

As of this year, payment became linked to QOF rather than to a DES and the survey was extended to comprise 49 questions in England and Northern Ireland encompassing all-round patient experience rather than just access. The surveys in Scotland and Wales are much shorter but the questions on which payment is based are broadly the same. From 2009 in England the survey will run quarterly with payment made at the end of each year. Ipsos MORI intends to invite 5.7 million adults in England to participate in the survey, breaking down into 1.4 million adults quarterly.

Despite the extension of the survey, payment to practices is based on just two sets of questions which support assessment of the access indicators in QOF covering rapid access and advance booking. PE7 varies slightly across the four countries reflecting national standards:

PE 7 Patient Experience of Access (1)

Q6. In the past 6 months, have you tried to see a doctor fairly quickly?

By 'fairly quickly' we mean on the same day or in the next 2 days the GP surgery or health centre was open.

Yes Please go to Q7

No Please go to Q9

Can't remember Please go to Q9

Q7. Think about the last time you tried to see a doctor fairly quickly. Were you able to see a doctor on the same day or in the next 2 days the GP surgery or health centre was open?

Yes Please go to Q9

No Please go to Q8

Can't remember Please go to Q9

PE 8 Patient Experience of Access (2)

Q9. In the past 6 months, have you tried to book ahead for an appointment with a doctor?

By 'booking ahead' we mean booking an appointment more than 2 full days in advance.

Yes Please go to Q10

No Please go to Q11

Can't remember Please go to Q11

Q10. Last time you tried to, were you able to get an appointment with a doctor more than 2 full days in advance?

Yes

No

Can't remember

Practices will receive payment if they achieve the following thresholds in the two patient experience indicators (PE7, PE8). The higher the percentage score achieved within the

designated thresholds the higher the points achieved and the greater the achievement payment to the practice.

Indicator	Points	Threshold
PE7 – The percentage of patients who, in the patient experience survey, indicate that they were able to obtain a consultation with a GP within 2 working days.	23.5	70-90%
PE8 – The percentage of patients who, in the patient experience survey, indicate that were able to book an appointment with a GP more than 2 days ahead.	35	60-90%

QOF points are worth £126.77 each so these indicators PE7 and PE8 are potentially worth £2979 and £4437 respectively to average practices.

What appears to have happened

Enough questionnaires were sent out to elicit a statistically valid number of responses based on previous survey experience. However, because this is such a long survey, respondents appear not to have completed all of the questions. When it comes to the two questions which determine practice funding (PE 7 & PE 8) it appears that they have not always been answered. In some cases more patients have answered PE 7 than PE 8. This has had a big impact on the results of those practices where this has been particularly pronounced.

While the majority of practices should end up being rewarded based on statistically significant responses from a reasonable number of patients, some may have their results determined by a tiny proportion of their total practice population. In theory, an average practice with around 5800 patients could end up losing almost £7500 on the basis of responses from only a few dozen patients. This is appalling, unfair and will have a devastating effect on these practices. It should be noted in this context that the best possible result for practices is that they retain their existing QOF funding. If practices score less than 90% on either of these two questions, they receive a cut in QOF income.

According to the information that is coming in from LMCs and individual practices it appears that the same thing is happening in England, Wales and NI as has happened in Scotland, where we now have the complete national picture.

GPC position on the survey

We think it is extremely important to get patient feedback and surveys are a good way of doing this. However we have long had problems with this survey. In particular the length, which we always said would put people off replying, the change in process (from practice-based to postal survey), and the exorbitant cost.

We raised concerns with Alan Johnson and Ministers in the other nations and we had been voicing them long before that to officials from the Health Departments. Despite this, the government went ahead and essentially imposed a fundamentally flawed survey on the profession.

The resultant impact on some practices will be extremely unfair and it could have a knock-on effect on the services they provide to their patients. It is ironic that this survey is supposed to improve access, yet these practices will unfairly lose money making it harder for them to do just that. It is sad that the taxpayer will be putting money into a survey that will result in potential reductions in funding to the very practices that need the funding to improve services to patients.

What has GPC done since we learned of the situation, what are going to do & what is our advice to GPs?

There have already been meetings between GPC, NHSE and senior officials in the Departments of Health. We have stressed to all of them that this situation needs to be resolved as a matter of utmost urgency. They have said they are going to consider what

they will do next. We will continue to press the Departments of Health on this. Depending on the outcome of these negotiations we will consider what further action we might take.

We offer our full support to any practices that feel they may have lost out unfairly because their results are statistically insignificant, the sample size is too small, or the result is inaccurate in any other way.

If a practice feels that their results do not reflect the reality of what they offer patients then they should put in a QOF appeal to their PCO. We will provide them with a template letter so they can be happy that the wording they use is legally watertight. This letter will be up on our website as soon as possible and will also be sent to all LMCs.

Further information will follow as soon as we have it.

20.5.09