



Your health & social care partnership

Community engagement report

Aberlour Medical Practice



April 2024

1. Background

Aberlour Medical Practice had a contract with NHS Grampian to provide general medical services to patients registered with the practice.

An inability to recruit additional GPs following the retirement of some GPs and others leaving to take up posts elsewhere, had left Dr Annabel Ross as the single GP partner. She did not feel this was sustainable and made the difficult decision to resign from the Aberlour contract on 18 February 2024.

The practice, which has just over 3,000 patients, will be managed and operated by Health & Social Care Moray (HSCM) on an interim basis. Once HSCM is satisfied with the position of the practice, a contract tendering process will be put in place to return Aberlour to independent practice arrangements.

Patients were informed of the change by letter sent by Royal Mail on 27 February 2024. The letter, accompanied by a frequently asked questions sheet, provided information for patients on how to contact HSCM with any immediate concerns. It also detailed an invitation to attend a community engagement event to discuss the present situation and plans for the practice going forward.

2. Community engagement event

Around 170 people came along to the drop-in engagement event held on 18 March 2024 from 2-7pm in Fleming Hospital, Aberlour.

Officers from HSCM spoke to the current situation at the practice and next steps, provided assurance and answered questions. Members of the Health Improvement Team and Occupational Therapy Service presented information on opportunities for health and wellbeing self-management and promoted the range of services available at the Fleming Hub (formerly Fleming Hospital).

People were encouraged to make use of a short questionnaire to share feedback on their experiences of being with the Aberlour practice. Comments were invited on what worked well at the practice as well as opportunities for improvement and future priorities.

Printed copies of a feedback form were available at the event and subsequently at the Aberlour Medical Practice and the Aberlour Community Day held in the Fleming Hall on 24 March. The form also provided a link to an electronic version.

Patients could also make comment at the event using post-it notes. The key themes from their **“What matters to you?”** responses has been summarised as follows:

➤ Access to care

Patients expressed concern over the availability of appointments and expressed their preference for in-person consultations with their GP rather than phone appointments,

➤ Continuity of care

Patients valued the relationship and familiarity that comes with seeing the same GP consistently. They believed this leads to more effective care and better healthcare outcomes.

➤ Services and clinics

It matters to patients, including those who are older or who have chronic, long-term conditions, that they have access to regular health checks, screening, clinics and medication reviews. Patients also felt they would benefit from a wider range of services being available in practice, such as physio and sexual health testing. They want to understand what services are already available and how to access them.

➤ Staff

There was praise for a previous locum GP and a wish for him to return to the practice. Patients also thanked the nursing staff and receptionists who have “kept going” despite ongoing challenges.

➤ Patient experience

Patients want to feel welcome at the practice, with a prompt response to calls. They expressed concern at reception staff notifying them of test results. To improve communication and engagement, a patient group was suggested.

➤ Fleming Hospital

Patients called for a return of in-patient beds in Fleming Hospital. They felt re-opening the community hospital for step-down care would reduce pressure on Dr Gray’s Hospital and would be an advantage to the practice in terms of attracting staff, including training opportunities for students.

3. Event evaluation

People were invited to give feedback on the engagement event as they left the building. In general, there was appreciation for the opportunity to talk to officers and the majority rated the session positively, describing it as:

- very good/good
- worthwhile
- beneficial
- positive,
- informative

The room was felt by one person to be too small for the amount attending and another commented it was very noisy which made conversations difficult to hear. A very small number of attendees who gave feedback did not feel the event was worthwhile, commenting that it “did not tell us much,” “disappointing” and “expected more.”

4. Feedback forms

By 24 April 2024, 46 feedback forms had been returned. The majority were completed electronically.

5. You said - what we heard from patients

A. We asked: What feedback would you like to share on your experience of being a patient at Aberlour?

Overall, the feedback indicated a mix of dissatisfaction with certain aspects of care and the service from Aberlour Medical Practice, alongside recognition of areas of good practice, areas for improvement and a desire for better communication, consistency and quality of care.

Patients had been satisfied with the service provided by the practice pre-COVID, saying it ran smoothly and provided excellent care, but since then had found it difficult to access appointments. Concerns were raised that HSCM had not acted sooner to address the issues at Aberlour which had impacted patients for some time.

The comments also expressed a sense of optimism from patients who spoke of initial improvements under the interim arrangements.

➤ Quality of care and diagnosis

Some patients expressed concerns about the quality of care received, including instances of misdiagnosis, delayed diagnosis, and lack of thorough investigation into symptoms. There were complaints about not receiving appropriate treatment, not being listened to and feeling that their condition was not taken seriously.

➤ Access to services

Patients report difficulties in accessing services, including long wait times for appointments, challenges in reaching medical staff, and difficulties in securing face-to-face consultations. They described it as a “fight” to get an appointment.

Some said they were reluctant to contact the practice because of previous poor experiences and that this had negatively affected their health.

Patients had issues with the triage system and having to explain their symptoms to a receptionist in order to be put on the list for a more urgent appointment. Often they did not receive a call back.

There were many mentions of phone consultations being inadequate, especially for conditions requiring physical examination.

Many felt unable to access health checks and screening. Regular reviews of chronic conditions had not taken place.

➤ Continuity of clinician and consistency of care

Patients expressed frustration with the lack of continuity in seeing the same doctor or nurse, which affected their ability to build trust and rapport. They spoke of seeing different GPs all the time who were strangers to them and who gave differing advice, leaving them unconvinced that their medical needs were been met.

They highlighted the importance of having consistent clinicians who were familiar with their medical history and want to be able to choose who they have an appointment with.

Continuity was a particular issue for patients with complex needs such as those who were under the care of hospital consultants and needed to have a GP who was familiar with their history and able to work effectively as part of the wider healthcare team, Patients were frustrated at not having a named GP for referrals.

➤ Communication and administration

Several comments mentioned poor communication between patients and members of the practice team, including difficulties in obtaining test results, lack of explanation about results or treatment plans, and feeling uninformed about their own care and not involved in decision-making.

Patients noted instances of tests being lost or not sent away and delays in referral letters being sent, as well as challenges in accessing medical records and information. They felt they always had to do the chasing of results. There were also instances where patients felt their concerns had not properly addressed or acknowledged.

The reception area was not always staffed and the waiting area was considered uninviting.

➤ Positive experiences

Despite the criticisms, some patients also mentioned positive experiences, such as friendly staff, being able to get appointments when needed and high-quality care from members of the practice team and wider multi-disciplinary team.

Staff were apologetic when thing did go wrong and did their best to resolve issues.

B. We asked: What works well at the practice?

Overall, patients valued the friendly and efficient service from reception staff and recognised the dedication of practice employees who they appreciated for doing their best over a difficult period.

There were mixed experiences reported, with some patients expressing satisfaction with recent improvements or specific staff members, while others express uncertainty or dissatisfaction, particularly amidst periods of change within the practice.

Some people had very little contact with the practice and felt unable to comment.

➤ Dedication and helpfulness of staff

Many patients appreciated the efforts of staff, describing them as cheery, helpful, empathetic and professional. They appreciated they had been working through a difficult and unsettled period.

Patients acknowledged the dedication of members of the practice team who were caring and listened to them. They appreciated when staff took time and didn't make them feel rushed. There was particular praise for the pharmacists and the Aberlour Pharmacy, health visitors and district nurses.

➤ Efficiency of services

Patients felt staff worked efficiently and that the practice worked well when good communication between staff was happening.

They valued the times when it had been easy to access appointments as well as efficient and prompt responses to phone calls and inquiries. They were usually seen on time for appointments. There was an efficient system for issuing repeat prescriptions.

➤ Challenges and limitations

Many patients were unable to identify anything that been working well, although recent positive progress was noted, with staff prepared to listen and help. Patients were disappointed when good locum GPs moved on.

Some patients highlighted difficulty ordering repeat prescriptions and had concerns systems had been introduced without appropriate staff training and ongoing support.

C. We asked: What could be better?

Overall, patients sought improvements in access, continuity of care, communication, holistic treatment approaches, and staffing stability to improve their healthcare experience.

➤ Reduce waiting times

There were concerns about long waiting times for appointments, especially for urgent issues. Patients mentioned instances where appointments were scheduled weeks after initial contact, which they felt was unacceptable.

➤ Improve access

Patients called for better access to nurses and GPs, particularly through face-to-face appointments. They questioned why calls continue to be triaged and urged the “gatekeeping” role of reception staff be reduced. They felt that receptionists should not be “diagnosing” over the phone and highlighted the importance of speaking directly to healthcare professionals for full assessment of medical problems.

They mentioned the need for choice in appointment types, easier appointment scheduling processes, and better accessibility for elderly patients who may not use online platforms.

Patients wish to see the reception staffed at all times and to be given a friendly welcome. With new housing planned for Aberlour, there was a concern about the capacity of the practice to cope with additional patients.

➤ Consistency and continuity of care

Patients emphasised the need for a consistent GP or healthcare provider to build a relationship with and ensure continuity of care. They found it frustrating to see different GPs each time, leading to confusion, poor communication and a lack of confidence in the treatment received.

➤ Stable workforce

Patients called for a stable workforce of GPs and healthcare staff to ensure consistent care delivery. They also emphasised the importance of training and support for inexperienced staff, particularly in reception roles.

➤ Improved communication

Patients highlighted the need for better communication between the practice team and patients and with consultants. This includes providing detailed test results, clearer guidelines on care expectations, and keeping patients informed about changes in services or procedures.

The practice website and Facebook page should be regularly updated, although it was pointed out the practice shouldn't rely on these to communicate with patients as not everyone uses them.

➤ Holistic approach to treatment

Patients expressed a wish for a more holistic approach to managing their health, rather than just addressing individual symptoms. They highlighted the importance of regular health checks, personalised care plans, and opportunities to discuss their illness comprehensively.

Patients highlighted the importance of being informed and involved in their care. They want a return to regular health checks and reviews. There were opportunities to improve mental health support.

➤ Additional services

The community wants to see Fleming Hospital re-opened as an in-patient hospital with a minor injuries unit.

D. We asked: Looking ahead, what matters most to you about your GP practice?

Overall, patients prioritised timely access to care, continuity of relationships with GPs, effective communication, a supportive environment, proactive management of chronic conditions, and strong community engagement in shaping the future of healthcare provision.

➤ Access and availability

Patients emphasised the importance of being able to see a doctor promptly when needed, without lengthy wait times or difficulty in booking appointments. They value in-person appointments as giving GPs a better opportunity to make a clinical assessment. They don't feel phone consultations are appropriate, particularly when they don't know the clinician they are speaking to. Patients said they found online services such as Near Me video calls and e-consult difficult to use.

They seek reassurance that having a team of permanent GPs – at least two and preferably three - will reduce the risk of not being able to access urgent, on the day appointments. They hope Aberlour can recruit and retain committed GPs who want to be part of the community and work here for the long term.

District nurses and health visitors were recognised as important members of the multidisciplinary team.

➤ Continuity of care

Patients called for greater continuity in their healthcare. They want to be able to request to see the same GP who can then get to know them and in who they can build trust and have confidence. They want to have a named GP.

➤ Patient experience

Patients highlighted the importance of a welcoming and supportive atmosphere in the practice. They don't want to feel like a “nuisance” and want a practice that is well-managed, with calls answered promptly.

The waiting room would benefit from improvements, including the return of a children's play table.

Patients value effective communication and attentive listening from both medical staff and receptionists. They want to feel heard, understood and respected for their lived experience.

➤ Long-term planning and ongoing care

Patients with long-term conditions and on regular treatment expressed a wish for structured annual appointments with their GP, along with regular reviews and involvement in decision-making about their care. They value proactive management and coordination of their healthcare needs.

More local services, including remote consultations, would reduce the need to travel to Dr Gray's Hospital or Aberdeen Royal Infirmary.

➤ Community integration and trust

Patients wrote about the significance of the practice's role within the community, emphasising the need for transparency, accountability, and a sense of partnership between the practice and the local population.

People seek assurance that the practice remains open and committed to improvement, acknowledging past shortcomings and striving for positive change. They want to be able to challenge the practice if they feel standards/targets have not been met. Having a named person at the practice to contact with feedback/complaints would be helpful.

➤ Fleming Hospital

Patients wish to see Fleming Hospital reopened as an in-patient community hospital or utilised in some way as a step-up/step-down care facility. They feel it will help with GP recruitment.

Signage around the building needs improvement and parking for people with restricted mobility is limited. There are no disabled parking spaces. It was suggested volunteers could support environmental improvements such as planting and maintaining flower tubs.

6. Next steps

Actions are being taken forward by Health & Social Care Moray to respond to the issues raised by patients.

These include:

- Staff recruitment to strengthen the practice team
- More pre-bookable appointments which can be in person or telephone consultations
- Clinics for long-term conditions
- Improvements to the reception area
- Staff available on the reception desk
- A newsletter to help keep patients updated.

Next time you're in the practice, have a look at the improvement tree which is a visual tool we're using to evidence how we are using feedback from patients to make changes.