

THE HEALTH CARE COMPLEX

PATIENT PARTICIPATION REPORT

2013/14

An introduction to our practice and our Patient Reference Group (PRG)

Our practice has a PPG which meets every 3 months on a Saturday morning. Our group consists of a GP and Practice Manager. The Practice Manager chairs and minutes the meetings and provides all administration to facilitate these meetings. The group has regular attendees and also virtual members who are unable to attend the group, but receive papers via email. The virtual members are also encouraged to provide feedback where necessary and any issues brought up by virtual members are discussed at meetings. We currently have 15 members of the group and are actively inviting and encouraging new members of all ages to join.

Establishing the Patient Representative Group

This shows how the practice has tried to ensure that the PRG is representative of the wider practice population. Information is provided here on the practice and PRG profile.

	Practice population profile	PRG profile	Difference
Age			
% under 18	937		
% 18 – 34	892	3	
% 35 – 54	1155	5	
% 55 – 74	866	6	
% 75 and over	276	1	
Gender			
% Male	2141	6	
% Female	1985	9	
Ethnicity			
% White British	4097	14	
% Mixed white/black Caribbean/African/Asian	2		
% Black African/Caribbean			
% Asian – Indian/Pakistani/Bangladeshi	13		
% Chinese	6	1	
% Other	8		

These are the reasons for any differences between the above PRG and Practice profiles:

Our PPG has 15 members.

The group comprises one GP and one Practice Manager who consistently attend and chair the meetings.

All our members are British, apart from the GP who is Chinese.

The vast majority of our practice population are British and we feel this represents our practice population very well.

We have 6 male and 9 females in the group. Most members are over 50 who attend our group, but we also have under 50's who form our virtual group and receive minutes from the meeting and are able to input into the meetings.

Our PPG comprises a patient in a wheelchair who also has a guide dog and a patient who is suffering from cancer.

We recruited 2 new members at the end of 2013 – one of which is a regular member who attends the meeting and the other a virtual member. Both these members were recruited by the GP who is actively looking for new members.

We are encouraging virtual group members who are interested in joining the group, but are unable to attend the meetings. These members are able to send their views via email to the Practice Manager for inclusion in the PPG meetings.

All our new patients receive a PPG leaflet in their welcome packs encouraging them to join our PPG, there is an advertisement about new members on our practice leaflet and website.

A flyer was also attached to the patient survey, which was very successful and we have recruited some new members to join our group this year.

In addition to the above demographic factors this is how the practice has also taken account of other social factors such as working patterns of patients, levels of unemployment in the area, the number of carers:

We run our PPG on a Saturday morning in order to aid those who do work full time and carers.

We also have virtual members of the group who receive copies of minutes and papers via mail or email. These members are able to provide feedback into the meetings via email or mail.

This is what we have tried to do to reach groups that are under-represented:

We are inviting all ages to join our group by placing leaflets in new welcome packs, advertising in the practice leaflet and on the practice website. The GP's and Nurse are inviting patients following consultations.

We are aware that younger patients need to represent the practice and are proactively inviting these.

Setting the priorities for the annual patient survey

This is how the PRG and practice agreed the key priorities for the annual patient survey

The practice obtains the views from the PPG members by being involved and attending the PPG meetings. The Practice Manager chairs, minutes and arranges all the PPG meetings and there is always a GP who attends. The key priority areas were chosen by the PPG group in a meeting held in November 2013.

The PPG agreed on the following areas:

- Building
- Appointments
- Staff
- Obtaining a Repeat Prescription
- Extended hours
- Consultations

The PPG wanted to eliminate the patient ethnicity as they felt this didn't reflect anything, but the Practice Manager explained that this was a mandatory question which lays in the patient detail part at the beginning of the survey.

The PPG also wanted a question at the end of the survey on the overall satisfaction of the practice and a comment box which the patient could insert any extra points.

Last year the PPG also put an invite at the end of the survey recruiting new members of the PPG. The PPG felt the response was poor due to them not wanting to fill out their personal details on an anonymous survey. Therefore this year the PPG came up with an idea of attaching a separate flyer, which would thank the patient for completing the survey explain a bit about the PPG and have a part on the back for them to fill in and send back to reception if they wished to join the PPG.

Designing and undertaking the patient survey

This describes how the questions for the patient survey were chosen, how the survey was conducted with our patients and includes a summary of the results of the survey (full results can be viewed as a separate document)

How the practice and the Patient Reference Group worked together to select the survey questions:

The PPG were happy with the questions used on the survey the previous year as they felt that the questions covered all the areas of the practice and the PPG would be able to look at improving any of these areas.

The PPG did feel however, that the survey was very long (4 pages) and would like the survey this year to be condensed onto one page, double sided. The PPG went through the questions from the survey last year and combined questions to make the survey shorter and easier for patients to complete.

How our patient survey was undertaken:

The survey was handed out consecutively to patients on the reception by our reception staff over a 2 week period in January 2014. As there are 2 GP's in the practice it was agreed by the PPG that the surveys were distributed evenly. 120 surveys were completed – 60 for Dr Oza and 60 for Dr Nam.

Summary of our patient survey results:

120 surveys were completed by a vast spectrum of patients split equally over the 2 GP's in the practice. The results of the 120 surveys were as follows:

91% of the patients thought the cleanliness of the building was above average.

6% found the confidentiality of the reception area to be below average.

Over 60% were able to pre-book an appointment with the GP.

73% of patients were able to get a same or next day appointment.

98% of patients had their prescriptions ready on time and of this 92% found this service to be above average.

61% of patients were aware that the practice carried out extended hours and of this 25% had used this service.

81% of patients were seen within 0-10 minutes of their waiting time.

92% of patients rated their overall satisfaction of the practice above average.

Analysis of the patient survey and discussion of survey results with the PRG

This describe how the patient survey results were analysed and discussed with PRG, how the practice and PRG agreed the improvement areas identified from the patient survey results and how the action plan was developed:

How the practice analysed the patient survey results and how these results were discussed with the PRG:

The Practice Manager analysed the patient survey results and sent copies out to all PPG members prior to the PPG meeting in February 2014.

The results were presented to the PPG and an open discussion took place with members and representatives from the practice.

The key improvement areas which we agreed with the PRG for inclusion in our action plan were:

Overall the survey was very positive.

The PPG agreed on the following areas:

Getting through on the telephone for same day appointments.

Patients being able to see the GP of their choice.

Identification of Receptionists.

Patients being able to speak to a GP or Nurse over the telephone.

Ordering repeat prescriptions online.

We agreed/disagreed about:

It was agreed that the extended hours has been addressed as there is a higher percentage of patients knowing and using this service. The practice will continue to advertise and promote these services.

DNA appointments have also been addressed in PPG meetings with the practice and this is something the practice will continue to monitor.

The refurbishment of the practice is ongoing as the work has not been undertaken so far, but is due to be done in the future. The Practice Manager will continue to keep the group informed about this.

ACTION PLAN

How the practice worked with the PRG to agree the action plan:

In February 2014 the PPG discussed the findings of the survey and agreed on key areas for action.

Several actions were discussed and improvements were made by the PPG.

The PPG are aware that the refurbishment work on the practice will take place in the future. This is a standard item on the PPG agenda and the PPG members are updated on this. It was therefore felt that this didn't need to be on the action plan as this was in hand.

The PPG looked at the poor/fair areas of the survey and discussed ways of improving these areas. This formed the basis of the action plan.

We identified that there were the following contractual considerations to the agreed actions:

Refurbishment in the reception area in the future to be carried out.

Copy of agreed action plan is as follows:

Priority improvement area Eg: Appointments, car park, waiting room, opening hours	Proposed action	Responsible person	Timescale	Date completed (for future use)
Getting through on the telephone from 8:30am to make an appointment the same day is not easy.	The practice through the PPG have already put into place a specific time for patients to ring with repeat prescription requests (everyday 2pm- 5pm). This was to ensure the phones would not be blocked up during the busy mornings. The PPG felt	Mel Yorke	3 months	

	<p>would be good to adapt a system between 8:30 – 9 where appointments for the day only can be made. There are 2 phone lines and 2 members of staff would be on to take the calls. All patients who request anything other than an appointment for that day are asked to ring back after 9am. The PPG have also discussed the online booking system for appointments and the practice is now up and running with this service which will also take the strain off the phones.</p>			
Ordering repeat prescriptions online	<p>It was agreed that patients would welcome the ordering of repeat prescriptions on line which will further reduce the calls. The Practice Manager to make sure this facility is in place from April 2014 onwards.</p>	Mel Yorke	3 months	
Ability for patients to speak to GP or Nurse over the phone	<p>GPs have on call slots where they take calls and do home visits after morning surgery. The PPG felt it would be beneficial for the nurse to also have slots for calls between 12:30 and 1pm when the GP's would be off site doing home visits.</p>	Mel Yorke	6 months	
Patients do like to see a GP of their own choice and do find this is difficult at times.	<p>PPG discussed appointments and how they are allocated. It was agreed that the appointments are filled up equally for each GP. Where a patient specifically asks for the</p>	Mel Yorke	4 months	

	GP the appointments are allocated. The reception team are to offer appointment time slots, but not specify which GP it is with unless asked by the patient.			
Due to the recruitment of several new members of the Reception team the patients are not able to identify who they are speaking to – it's always nice to put a name to a face.	The PPG felt that the reception staff should have badges on so patients know who they are talking to as there have been several new recruitments during the year. Mel to order some badges for the reception team.	Mel Yorke	5 months	

Review of previous year's actions and achievement

We have summarised below the actions that were agreed following the patient survey 2012/13 and whether these were successfully completed or are still on-going and (if appropriate) how any have fed into the current year's survey and action plan:

“You said We did The outcome was”

You Said: The cleanliness of the toilet facilities were highlighted by on patient on the survey. The PPG discussed the cleaning regime within the practice of how facilities are checked and when they are checked. It was felt that the patient toilet should be checked on a daily basis – once in the morning and then in the afternoon before the clinics commence.

We did: The Practice Manager discussed the cleaning and checking of the patient toilet with all staff at a practice meeting. Highlighting the need for the facilities to be checked twice a day. It was also agreed that a poster should be displayed on the toilet door informing the patients that if the facilities were not up to a good standard to inform the reception.

The outcome was: The reception staff check the patient toilet twice a day once in the morning and again before the afternoon surgery. There is a notice on the door to inform patients that if they are not happy with cleanliness of the facilities they are to inform the reception and the reception will then act on this.

You Said: Privacy in reception was felt to be a big concern. The front reception desk is open and there's nowhere for any confidential issues to be discussed if a patient wants to talk to someone. The door to the reception area is constantly left open and the PPG felt this door should be kept shut for confidentiality.

We did: The PCT are carrying out refurbishments within the practice to comply with CQC regulations. The reception area has been addressed within this work. The new refurbishment will include fitting a new desk with disabled access and securing the door to the reception. A discussion with all staff took place around patients being able to talk about private issues and it was agreed that all reception staff will take patients into a private room to discuss any private issues.

The outcome was: Due to the refurbishment being on hold the practice were unable to complete any issues around the reception area, but the Practice Manager had a new lock put on the reception door

to make sure the reception door can be shut at all times. A notice has been put on the door both sides to remind staff to shut the door at all times. A notice has also been displayed in the reception to inform patients if they wish to discuss something in private to inform the reception and they will take the patient into a private room off the reception.

You Said: The PPG have been focusing on did not attend (DNA) rates as these have been considerably high. The PPG felt that the practice needed to encourage patients to keep their appointments and look at ways of informing patients about their prebooked appointments to reduce the rate of DNA's.

We did: The practice carried out an initial DNA audit over a 6 month period. Following this the practice then reduced their length of prebookable appointments to see if this had an impact on DNA's. A further audit was produced which showed reducing the length of prebookable appointments had no impact on DNA's. The audit showed a high rate of DNA's on same day appointments. The PPG felt that the persistent DNA's should be contacted in some means by the practice.

The outcome was: The practice put their prebookables back to their original length as this had no impact. The Practice Manager looked into using text messages to send instant messages to those who DNA. The practice has been able to set up text messaging and uses this for all DNA's.

You Said: Some patients find it difficult getting through on the telephone during opening hours. Patients had commented that they sit in reception and see the telephones are not being answered.

We did: The Practice Manager addressed telephones with the reception staff ensuring all phones are answered as soon as they ring.

The outcome was: All reception staff are answering the telephones as soon as they ring.

You Said: Repeat prescriptions are currently being ordered by patients bringing their prescription into the practice as this is the only means of ordering them.

We did: The practice opened up a telephone line on a Thursday between 2 – 5 for patients to ring the practice to order their prescription. This would facilitate those patients who worked or where not able to come to the practice.

The outcome was: This service was successful and through the PPG patients are now able to contact the practice every day between 2pm – and 5pm to order their prescription.

You Said: Patients were not aware of the extended hours service the practice provides.

We did: The practice advertised the extended hours on the practice website, in the reception, repeat prescriptions and in the practice leaflet. The reception also promoted this service to patients.

The outcome was: Following this years survey it shows a higher percentage of patients who know and use the service. The practice will continue to promote this service.

Where there were any disagreements between the practice and the PRG on changes implemented or not implemented from last year's action plan these are detailed below:

The CQC refurbishment work in the reception area has not been undertaken due to issues with the contractor. The PCT have another contractor, but need to sign contracts before any work can be carried out. The practice have been informed that the work will take place after March 2014. The practice keep updating the PPG on this development at every PPG meeting.

Publication of this report and our opening hours

This is how this report and our practice opening hours have been advertised and circulated:

The results of the patient survey were discussed in the PPG meeting in February 2014. An action plan outlining 3 key areas was also devised by the PPG in this meeting.

The results of the patient survey, action plan and report have been publicised on the practice website www.healthcarecomplex.co.uk

Full copies of the results, action plan and report have been sent to all the members of the PPG.

Copies of the results, action plan and report are also available on reception.

Practice opening hours are advertised on:

- Practice Leaflet
- Practice Website
- Front door of the practice

Opening times

These are the practice's current opening times (including details of our extended hours arrangements)

The practice is open between 8:30am and 6pm Monday – Friday. Patients can access services during these hours by telephone (01623 752312) or calling into the surgery.

Our practice does not close for lunch or non-educational Wednesday afternoons.

Between 6pm and 8am all calls are diverted to our 'Out of hours' provider.

Patients can book appointments via:

- Telephone the surgery and speaking to a receptionist
- Visiting the surgery in person and speaking to a receptionist
- On-line via practice website

Patients are encouraged to ring at 8:30am where possible so that we can try and offer a same day appointment.

Appointments can be pre-booked up to two weeks in advance.

Opening times as follows:

For the Doctors:

9am – 11:30am and 3:40pm – 5:40pm

When Dr Oza is on leave Dr Nam will start his consultations from 8:30am

For the Practice Nurse:

Monday – Friday
9am – 11:30am and 12:30pm – 4pm

For the Health Care Assistant:

Monday – Thursday
9am – 12:50pm

Extended Hours

The Practice also offers Extended Hours. These are pre-bookable appointments which are available one Wednesday evening and one Saturday morning a month as follows:

Doctor and Nurse:

Saturday Morning
9:10am – 11:10am

Doctor and Nurse:

Wednesday Evening
6:30pm – 8:30pm

Our practice have undertaken 4 PPG meetings since April 2013.