

Patient Participation Report 2012/13

Stage One						
1						
Practice Population:		4138				
			Sex:	Male	2136	Female 2002
Age:		Under 16's	686			
		17 - 25	367	36 - 45	787	56 - 65 398
		26 - 35	752	46 - 55	657	66 + 491
Ethnicity:		Caribbean		91 / 2.28%	<i>other:</i>	
British, Mixed British		2989 / 76.2%		African	58 / 1.45%	<i>other:</i>
English		0		Mixed Black	19 / 0.47%	<i>other:</i>
Scottish		4 / 0.10%		Chinese	23 / 0.57%	<i>other:</i>
Welsh		0		Japanese	1 / 0.02%	<i>other:</i>
Indian, British Indian		143 / 3.59%		<i>other:</i>	684 / 17.1%	<i>other:</i>
Are there any specific Minority Groups within the Practice Population?						
<p>As you can see from above the largest minority groups within our practice population are Indian, Caribbean and African which are still relatively small and total 7.3% of the practice population. Although when the ethnicity report is looked at in detail there are 57 other ethnic groups who's numbers in any one category do not exceed 10 with the majority being between 1-5 patients. These make up 17.1% of the practice population and they have been listed under 'other' as they are too numerous to list individually.</p>						

Validating that the patient group is representative of the practices population base. **Payment Component 1**

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Patient Representative Group Profile (PRG):

			Sex:	Male	2	Female	3
Age:	Under 16's	0					
	17 - 25	0	36 - 45	0	56 - 65	0	
	26 - 35	0	46 - 55	2	66 +	3	
Ethnicity:		Caribbean		<i>other:</i>			
British, Mixed British	4	African	1	<i>other:</i>			
English		Mixed Black		<i>other:</i>			
Scottish		Chinese		<i>other:</i>			
Welsh		Japanese		<i>other:</i>			
Indian, British Indian		<i>other:</i>		<i>other:</i>			

What steps has the practice taken to recruit patients and to sure it is representative of the practice profile?

Although we had been successful in recruiting 1 patient from each age band last year, people have dropped out of the group and recruitment has proved difficult. it is felt that as the PRG develops it would be beneficial to have more members in the 17-25, 26-35 and 46-55 age bands.

The practice has met to discuss who would be most suitable to be approached to be part of the PRG during the past year as members have declined to participate for another year. Taking into considerations if they were in employment, were caring for someone or had someone caring for them, had a disability or lived in a care or residential home we have campaigned for new members through word of mouth, posters in the waiting room. Also as the GP's and practice nurses have an in depth knowledge of the practice population and have also been involved in recruitment

Validating that the patient group is representative of the practices population base. **Payment Component 1**

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Compare the PRG with your practice profile and describe the differences between the practice population and membership of the PRG?

We have been unfortunate in recruiting a good age/sex mix onto our PRG. The majority of our practice population is British, Mixed British of which we have recruited 4 patients.

Further attempts have been made to recruit members from the missing ethnic group's i.e. African and Caribbean. We also tried to engage patients with a disability and those patients from a residential, nursing home

*Validating that the patient group is representative of the practices population base. **Payment Component 1***

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Please explain any differences in section 3 above and the efforts of the practice to communicate with groups not represented? (this is required even if the practice has chosen to use a pre-existing PRG)

We did struggle to engage patients from the Indian ethnic group, with no real reason given when asked why they felt unable to participate.

Letters were sent directly to all patients identified by the clinicians in the practice meeting who met the age, sex and ethnic criteria for the DES. These letters were written by the partners as a more personal touch was felt to have the most positive outcome. We are at a loss as to why some patients responded and some didn't.

The clinicians also approached patients meeting the criteria during consultations, again this was unsuccessful with the main reason given they didn't have time.

*Validating that the patient group is representative of the practices population base. **Payment Component 1***

Stage Two

Agreeing Priorities

5

How has the practice sought the PRGs views of priority areas?

After discussion with the PRG it was decided as they had no pressing areas of concern; obtaining feedback from the practice population would be the most logical step in finding a platform with which to move forward from. It was agreed to run a survey to obtain patient feedback to identify priority areas.

*Validate through the local patient participation report. **Payment Component 2***

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Please describe how the priorities for the survey were selected - do these reflect those set out by the PRG?

The practice informed the PRG that they perform a patient survey annually using a nationally recognized tool 'Client Focused Evaluation Programme' (CFEP) UK Surveys. CFEP have a variety of questionnaires available and it was decided 'Improving Practice Questionnaire' would again be the most appropriate as the questions were more relevant to areas of importance to patients. Another additional benefit with using CFEP is their ability to benchmark our practice data in relation to all practices nationally that has carried out an Improving Practice Questionnaire (IPQ). Since 2004 over 3,000,000 patients have completed an IPQ providing patient feedback to over 4,000 practices and over 16,000 health practitioners making it a reliable interpretation of patient feedback.

*Validate through the local patient participation report. **Payment Component 2***

Stage Three

Survey

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How has the practice determined the questions used in the survey?

CFEP UK Surveys was agreed by the PRG as the questionnaire of choice and as it is nationally recognized as a reliable and sensitive tool accurately measuring patient satisfaction in designated areas. IPQ specialise in patient feedback surveys for health professionals within primary care

Once the IPQ has been carried out on more than one occasion any change in patient satisfaction and perception of the service can be clearly and reliably monitored

*Validate the survey through the local patient participation report. **Payment Component 3***

8

How have the priority areas been reflected in the questions?

The PRG decided to use CFEP UK Surveys again as it was felt to be useful and informative tool and is an excellent way to identify the practice populations' views which would enable the PRG and the practice to identify areas of importance, which can be addressed in the coming months. Therefore the questions were not reflective of priority areas but to obtain a general overview.

Validate the survey through the local patient participation report. **Payment Component 3**

9

Describe the Survey - How and when was the survey Conducted?

The survey was conducted in January 2012. All patients attending the practice to see a clinician during that period were asked by the reception team if they would be willing to participate in the anonymous survey. If the patient agreed they were given a questionnaire and envelope. Once completed a box was placed on reception where the completed survey needed to be posted. Once all the questionnaires were collected they were sent by recorded delivery to GFEP UK Surveys for analysis.

Validate the survey through the local patient participation report. **Payment Component 3**

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What methods practice has used to enable patients to take part?

The questionnaire chosen by the PRG was reflective of the patient experience when attending the practice to see a clinician; therefore only patients leaving their consultation were approached by the reception team to give their views on their experience over the period of January 2013.

Validate the survey through the local patient participation report. **Payment Component 3**

Stage Three continued

Survey

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How has the practice collated the results?

Part of the service provided by CFEP UK Surveys is once the completed questionnaires are received by CFEP to be analysed the findings along with national benchmarks and patients free text comments are returned to the practice usually within 2-3 weeks, this ensures complete transparency on the part of the practice.

Validate the survey through the local patient participation report. **Payment Component 3**

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How were the findings fed back to the PRG?

Each PRG member of the group was given a copy of the findings prior to the meeting. The group compared the finding with the national averages and also read through the patients written comments which were discussed in detail. The results of last years report were also compared

Stage Four

Results

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Please describe survey results:

The results consisted of a detailed report and an overall patient percentage. The practice received 93% of all patients rating the practice as good, very good or excellent. There was also the opportunity for patients to make additional comments using a free text box

All written patient comments have been included in their entirety but details which could identify a specific patient have been removed to ensure anonymity.

Comments about how the practice could improve

- Get rid of the bilious yellow walls for a calmer less ill making colour please, (pale blue, pink, mushroom?) also change chairs for more ergonomic design. Surgery is also overheated and stuffy air.
- No improvement needed, everything very good.
- Excellent practice..
- I am happy with the way it is.
- Always very good.
- Longer opening hours. More complimentary medicines and practice.
- Earlier opening times.
- I've always been very impressed with the service from everybody at Sherrington Park for me and my family.
- It would save some visits if it were possible to leave phone or text messages or email.
- This is one of the best doctors surgeries I've been to.
- The practice is excellent. I have wondered if appointment times are always written down correctly, or else I have

(twice)! A cycle stand would be useful.

- Maybe extra nurse time for tests and injections.
- I love this practice as you know when you call them they will do everything they can to see and help you within a good timescale.
- Longer opening hours would mean less waiting days for an appointment.
- Not improve the service but save money. When sending out correspondence to the same address why not put reminders for Mr. and Mrs. in one envelope and not separate. Postage is so expensive now.
- Nothing to suggest, the service is great.
- Service is excellent, no comments.
- Late night opening for patients working full time.
- For my doctor to smile a little, look pleasant and greet each patient in a pleasant manner
- I am very satisfied with this practice.
- A Saturday morning service and a late night.
- Text phone reminders.
- Continue early evening appointments.

Comments about how the doctor/nurse could improve

- More time to discuss, appointments sometimes feel 'rushed' and it isn't easy to relax to talk about realistic issues.
- My doctor is very good and needs no improvement that I can see.
- None at all.
- A good doctor, maybe a little more opportunity to listen to patient but excellent service.
- I am happy with the way it is.
- My doctor is not fussy, and I don't want that. They are a good doctor who gives practical help.
- Well done to you all and thank you!
- I've always found my doctor excellent in assessing my condition, though I'm no doctor! They are efficient, welcoming and I always feel confident in their diagnosis. I always feel at ease and that I am not 'just a number'.

- Excellent services, I can't think of any suggestions except, continue as you are.
- My doctor is brilliant!
- No. My doctor is excellent. They don't make you feel rushed and listens and explains everything.
- Sometimes appointments feel quite rushed. Is there always a rush?
- This doctor is great as they are!
- Doctor should be more open for diagnose (right diagnose) and should advise right treatment. Usually paracetamol. Paracetamol don't help every time!
- Nothing to suggest. This doctor is a great G.P.
- They couldn't improve - this doctor is excellent, they are really involved and concerned for their patients.
- No. The doctors are so caring, attentive and pleasant. They make you feel at ease - and they listen to you.
- Suggest symptoms which might indicate when to give in and take antibiotics!
- No. This doctor has been very helpful in terms of supporting my son with his condition. Thank you.
- No comments, excellent.
- This doctor is very competent and professional and I have complete confidence in them at all times. There is really nothing I can think of in which they need to improve on in my opinion with me.

Validate the survey and findings through the local patient participation report. **Payment Component 4**

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Explain how the PRG was given opportunity to comment?

The results were discussed at length with the PRG group. Each member of the group was given the opportunity to raise any area they wished to clarify for further discussion from the findings. Not all the discussion was of a negative nature as there was some very positive feedback in the comments from the survey.

Validate the survey and findings through the local patient participation report. **Payment Component 4**

15

What agreement was reached with the PRG of changes in provision of how service is delivered?

Overall the PRG felt that the response to the survey was very positive. The main area identified from the patient feedback was regarding longer opening hours. After discussion about the practices current opening time i.e 8.30am-6.30 pm Monday – Friday with extended opening Tuesday am 7.20am – 8.00am with access to both GP's and Nurses. It was felt that the surgery opening times were acceptable. Discussion also took place around opening Saturday mornings. However the group were informed that when the practice had opened on Saturdays in the past uptake was very low.

The members felt the suggestion of text reminders to patients for appointments was a good idea. The practice had done some work on this previously and will now take this forward.

It was also decided to address the issue of patients perception of being rushed that a notice would be displayed in the waiting room informing patients the facility of booking a double appointment.

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Were there any significant changes not agreed by the PRG that need agreement with the PCT?

None

*Validate the survey and findings through the local patient participation report. **Payment Component 4***

Stage Four continued

Results

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Are there any Contractual considerations that should be discussed with the PCT?

None

*Validate the survey and findings through the local patient participation report. **Payment Component 4***

Stage Five
Action Plan
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How did you consult with the PRG about the action plan?

At then end of the PRG meeting a discussion took place between the members and practice representatives and areas that arose were noted.

*Consulting on the Action plan with the PRG and seeking PCT agreement where necessary. **Payment Component 5***

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Please give a brief summary of priorities and proposals agreed with the PRG arising out of the practice survey:

ACTION PLAN 2013/14

1. **Longer opening hours:**

As the practice is open for 10 hours per day with extended hours on a Tuesday it was felt to be untenable to resolve given the current constraints of general practice

2. **Text reminder for appointments:**

The practice had done some work on this previously and will now take this forward.

3. **Longer appointments if needed:**

A notice would be displayed in the waiting room informing patients the facility of booking a double appointment. This would also be added to the practice website

*Consulting on the Action plan with the PRG and seeking PCT agreement where necessary. **Payment Component 5***

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Were there any issues that could not be addressed? - if so please explain

None

*Consulting on the Action plan with the PRG and seeking PCT agreement where necessary. **Payment Component 5***

21

Has the PRG agree implementation of changes and has the PCT been informed (where necessary)

N/A

*Consulting on the Action plan with the PRG and seeking PCT agreement where necessary. **Payment Component 5***

Stage Six

Review of actions from 2011/12

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Detail information on actions taken and subsequent achievement from year One and directly link these to feedback from patients- eg 'you said....', 'we did....', 'the outcome was

1. You asked for '**A Water machine in reception**' – there was already a water cooler in the second waiting room in order to highlight this a poster was put up in the main waiting area
2. You said '**difficulty in getting through at 8.30am**' – we audited telephone access for the period of 1 month to identify any issues which would contribute to volume of calls. The outcome was inconclusive, however calls for test results are no longer taken until after 11am.
3. You asked for '**more toys in the waiting area**' – we currently have a range of toys and books however due to infection control and health and safety we are limited to what kinds of toys are permitted.
4. You said '**the waiting room can get too warm**' – As the waiting room is south facing it can get warm in the summer months, windows are opened, the blinds are closed to block the sun and fans are provided

23.

Explain whether there was any disagreement with the PRG on any of the actions in the action plan- this must be publically highlighted with the practices rationale for deviating from the suggested plan.

There was no disagreement with the PRG on any of the actions highlighted

24 Publication of Report

Please describe how this report has been publicized/circulated to your patients and the PRG

The report has been published on the Sherrington Park Medical Practice website, www.sherringtonpark.co.uk the questionnaire results and report have also been displayed in the waiting area.

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Additional Information

Opening Times

Confirm Practice opening hours - explain how patients can access services during core hours?

Monday	8.30am – 6.30pm
Tuesday	7.20am – 6.30pm
Wednesday	8.30am – 6.30pm
Thursday	8.30am – 6.30pm
Friday	8.30am – 6.30pm
Saturday	CLOSED
Sunday	CLOSED

Patients can access services during these times, either by telephone or attending the surgery. If patients wish to request a prescription this can be done either by email at spmp@gp-c84682.nhs.uk or fax or systmone online.

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Where the practice offers extended opening hours please confirm the times that patients can see individual health care professionals?

Extended opening hours are Tuesday mornings as follows:

7.20am – 8.00am both doctors and nurses are available at this time.