

Local patient participation report

This report summarises development and outcomes of [West Moors Group Practice](#) patient reference group (PRG) in 2012/13.

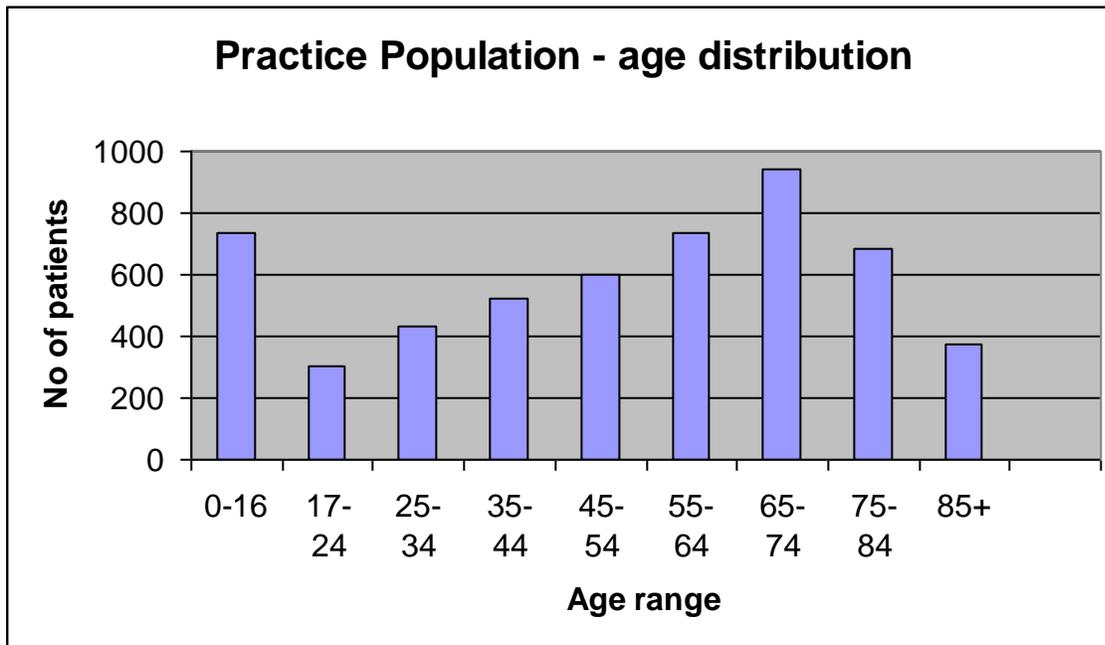
It contains:

1. Profile of practice population and PRG
2. Process used to recruit to our PRG
3. Priorities for the survey and how they were agreed
4. Method and results of patient survey
5. Resulting action plan and how it was agreed
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1. Profile of practice population and PRG

Practice population summary

Total practice population 5330 patients



Male – 47% Female – 53%

Carer's – 94 (1.75%)

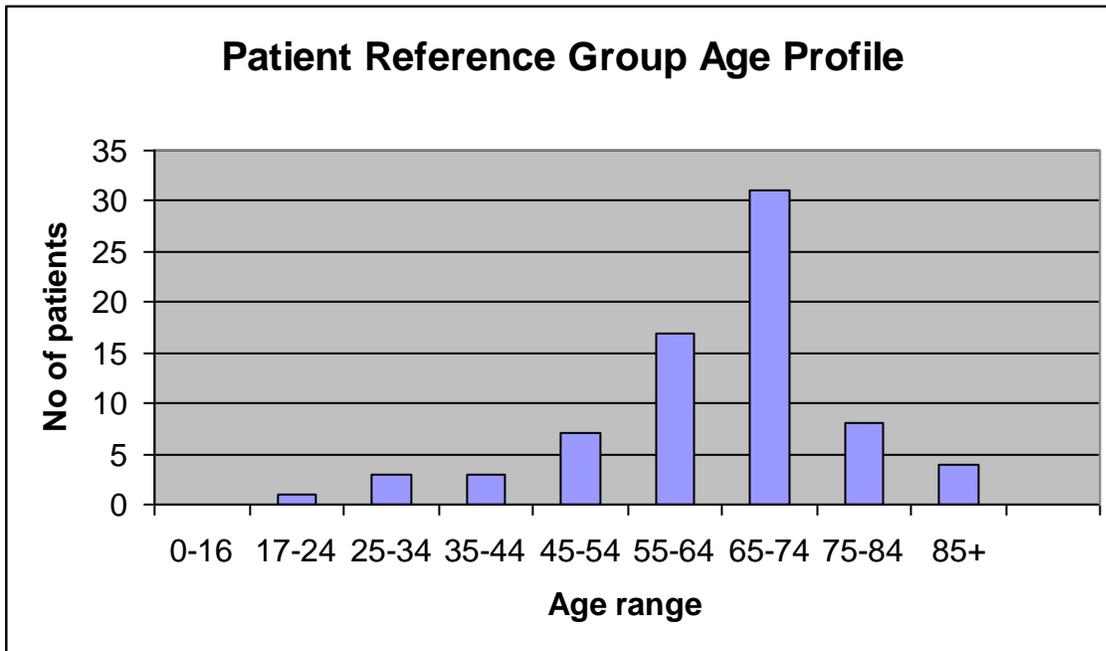
Vulnerable adult and elderly patients – 291 (5.5%)

Learning Disabilities – 21 (0.4%)

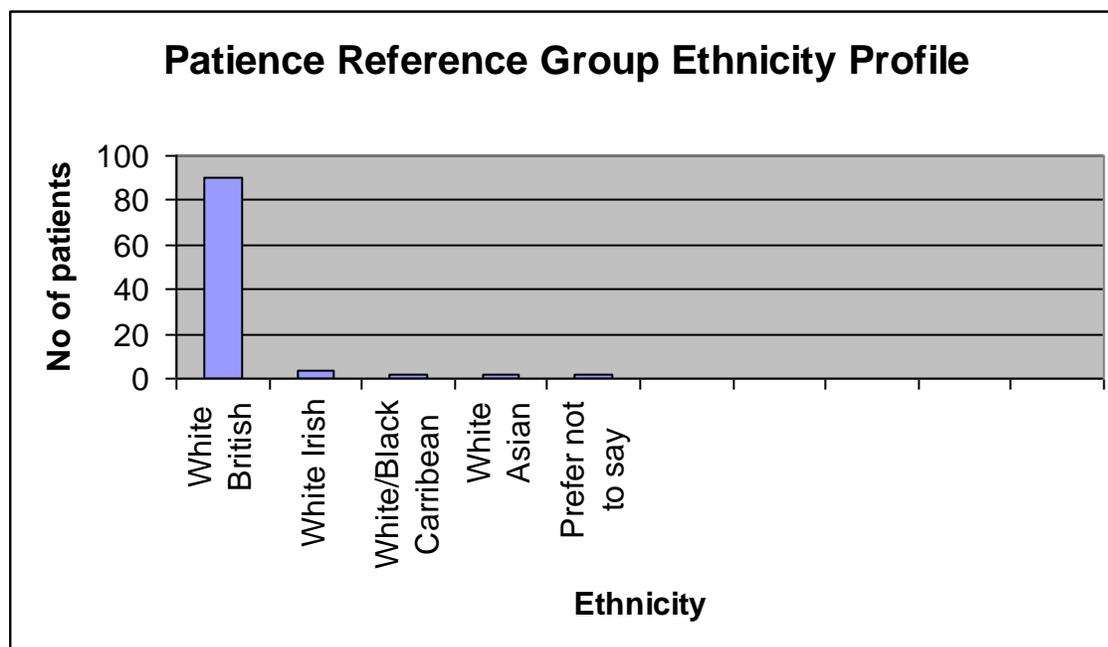
Ethnicity – 70% White/British 30% Other Ethnic Origins

Patient Reference Group profile

We have 74 patients in our PRG group, with the following age profile.



Ethnicity



2. Process used to recruit to our PRG

To recruit to our PRG we:

- Advertised in the practice – posters (Appendix 1), leaflets (Appendix 2), newsletters, receptionists asked patients.
- Advertised on our website – link to express an interest in joining group.
- New patients – letter and leaflet included in welcome pack (Appendix 3)
- Recruited at our annual flu clinic
- Wrote to a selection of patients who hadn't visited the surgery in the last year.

We have recruited 14 new members in 2012/13 but lost 6 members due to moving out of the area. We now have a total number of 74 patients in our PRG. The PRG represents a similar age and sex profile to the practice population.

All patients who attended the practice were encouraged to join the group.

We particularly invited patients who had not been to the surgery for an appointment in the last year, by letter.

Once patients had been recruited we sent them a 'what to expect' letter (Appendix 4). The main communication tool for the group was intended to be by email but patients who did not have access to the internet were assured they would receive communication via postal mail.

3. Priorities for the survey and how they were agreed

To determine the priorities for the survey we sent an email to our existing members thanking them for taking part in last year's questionnaire and inviting them to indicate which of the following areas we should focus on for this year's survey.

- Appointments
- Clinical Care
- Telephones
- Waiting Room
- Customer Service
- Parking
- Premises
- Opening Times
- Other – Please specify

31 people responded

4. Method and results of patient survey

We chose to use Survey Monkey, as it is a reputable online survey tool, which enabled us to choose our own questions focusing on our priority areas as well as including compulsory questions based on standard previous national surveys undertaken.

The questions were developed using:

- Feedback from the questionnaire sent to our existing PRG members inviting them to indicate which of the following areas we should focus on for this year's survey.

We carried out the survey (Appendix 5 & 6) using:

- Survey Monkey – emailed to 62 PRG members.
- Paper forms – sent to 12 PRG members who did not have internet access and had requested a hardcopy mail out.

We carried out the survey between 10th December 2012 and 21st January 2013

Survey results

The survey results can be seen in Appendix 8.

74 patients were sent the survey. 47 patients responded representing 64% of the group.

5. Resulting action plan and how it was agreed

To develop and agree an action plan the practice discussed the results of the survey and proposed actions on 11th March 2013.

To get comments from the PRG on the draft action plan and feedback on the results of the survey we:

- Emailed the group (Appendix 7)

74 patients were sent the proposed action plan. 10 patients agreed and gave comments representing 14% of the group. 64 did not respond.

Feedback was taken into consideration when developing the action plan. The PRG members were asked to reply to the email or return an acknowledgement slip (via post) to state agreement to the plan or make suggestions. The majority of members were in agreement and made some very positive comments about the service we provide.

We agreed the action plan with the group on Monday 18th March

The main actions were:

Action	By Whom	Changes implemented by
Opening Times – 18% of respondents didn't know if the Practice was open on a Saturday. We plan to make our opening times for both Surgeries clearer in our NEW Practice Booklet and more evident in the Surgery Waiting Rooms. Also to publish our opening	Practice Manager/Senior Partner	May 2013

times on our website		
Customer Service - 26% of respondents are aware of information of how to make a complaint. We Plan to make these leaflets more visible to patients - although fortunately we do not have a high percentage of complaints	Practice Manager	May 2013

Areas where we could not achieve what the PRG wanted were:

There was a suggestion that all appointments should be available on the internet via Emis Access, unfortunately this is not possible. Practice Nurse appointments cannot be booked on line, as some nurses cannot deal with all types of appointment and also some appointments need different length appointments i.e. asthma check 20mins, Bp check 10mins.

Some patients felt that our Waiting room needed some TLC. We do our best to keep the posters and information up to date and relative. The area is clean and tidy. We are limited in what we can do due to outgrowing the building and resources are needed in other areas. We cannot provide music as a licence is needed and again resources do not allow.

6. Recommendations from last year's report

- We now have a link on the welcome page of the Practice website
- OOH currently takes our calls between 8 & 8.30am when the Practice opens, this however is presently under review and this may be brought back in house.

7. Progress made with 2012 action plan

Action	Changes implemented
Appointment availability – review current triage system and look at options for on day embargo appointments.	The appointment availability has been reviewed and book on day appointments have been introduced to give patients better access to appointments for urgent matters.
Review Phlebotomy Appointments	We have recently undertaken a review of

– look at appointment availability and waiting times. Look at possibility of a specific INR clinic.	blood test appointments available and it is likely that the Practice will be able to offer more appointments and be able to offer INR blood tests to all patients who require them.
Online Booking – Available slots – increase slots available online and investigate options to include gender of locums.	We have increased the number of appointments available online and also included appointments for blood tests.
Online Booking – Advertising – to increase awareness with posters, leaflets and staff promotion of availability of online services.	This process is ongoing through advertising in the Practice, online and in the Practice booklet.
Telephone Access – review and redesign telephone menu options and create an overflow in busy times.	This was completed February 2012, we now have a far clearer telephone system, directing patients to the correct person and providing the overflow alleviate waiting time.

8. Confirmation of our opening times

Our opening times are:

Heathlands House (Main surgery)

Monday – Friday 8.30am – 6.30pm

Rushmoor House (branch surgery)

Monday – Friday 9am – 12pm

Monday and Thursday 2.30pm – 5.00pm

Wednesday 1.00pm – 3.00pm – Dispensary Only

Extended hours (mixture of routine and urgent appointments):

Monday 6.30pm – 8.30pm

Tuesday 7.00am – 8.00am and 6.30pm – 7.30pm

Thursday 6.30 – 7.30pm

9. Conclusions

The practice will continue to develop the Patient Reference Group to enhance numbers and improve the representation of the practice profile.

Nicki Gibbons
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28th March 2013