

## LOCAL PATIENT PARTICIPATION REPORT

Practice Name:      Western Road Medical Centre    F code:    F82013

### 1 Establish a Patient Reference Group (PRG) comprising only of registered patients

The table below reflects the practice population and the PRG profile by age, ethnic group and gender.

Practice population profile	Number	% of total	PRG profile	Number	% of total
<b>A G E</b>					
% Under 16	2496	16.5%	% Under 16	1	1%
% 17-24	1578	10.5%	% 17-24	10	7.5%
% 25-34	2236	15%	% 25-34	25	19%
% 35-44	2109	14%	% 35-44	20	15%
% 45-54	2136	14%	% 45-54	20	15%
% 55-64	1652	11%	% 55-64	25	19%
% 65-84	2583	16%	% 65-84	30	22%
% Over 84	439	3%	% Over 84	2	1.5%
<b>ETHNICITY</b>					
<b>White</b>			<b>White</b>		
% British Group	3576	63%	% British Group	106	80%
% Irish	106	2%	% Irish	1	1%
<b>Mixed</b>			<b>Mixed</b>		
% White & Black Caribbean	57	1%	% White & Black Caribbean	0	0
% White & Black African	18	0.75%	% White & Black African	0	0
% White & Asian	16	0.75%	% White & Asian	0	0
<b>Asian or Asian British</b>			<b>Asian or Asian British</b>		
% Indian	279	5%	% Indian	5	3.5%
% Pakistani	78	1.5%	% Pakistani	3	2%
% Bangladeshi	37	1%	% Bangladeshi	0	0
<b>Black or Black British</b>			<b>Black or Black British</b>		
% Caribbean	90	2%	% Caribbean	2	1.5%
% African	222	4%	% African	3	2%
<b>Chinese/other ethnic group</b>			<b>Chinese/other ethnic group</b>		
% Chinese	95	2%	% Chinese	4	3%
% Any other	950	17%	% Any other	9	7%
<b>G E N D E R</b>					
% Male	7317	48.5	% Male	44	33%
% Female	7712	51.5	% Female	89	67%

#### **a. Process used to recruit to the PRG:**

**The Patient Reference Group (PRG)** was formed in June 2011. We invited patients to become members of the Practice's PRG group using the following methods

**Practice website:** On the front page of our website we added a link inviting patients to complete a form to be submitted electronically; our patient group is still actively growing and patients are joining all the time. We now have a group size of approximately 140 patients.

**Waiting room:** A poster is displayed inviting patients to become members of the group. In addition on our call boards a message was displayed inviting patients to participate.

**PRG forms:** Forms were made available on the front desk of the surgery and outside the clinicians' consulting rooms. Receptionists actively encouraged patients to join the Group.

**Clinicians:** Patients were invited to join by the clinicians.

**New patients:** We invited all new patients when registering with the Practice to join the Practice's PRG if they wished.

**Pharmacies:** We asked our local pharmacies to make forms available to our patients when the patients were picking up their medication. They were happy to support us in this.

**Housebound patients:** We asked the district nursing team and also the pharmacists (when delivering medication) to make forms available to patients who do not attend the surgery due to their condition. They again supported us with this.

#### **b. Differences between the practice population and members of the PRG:** *describe any differences between the patient population and the PRG profile, what steps the practice took to engage any missing group*

The figures on Page 1 show a very good representation from the ethnic groups, including Russian, Greek, Filipino, Cuban who are recorded in the "any other" category – through their choice.

We have endeavoured to ensure all patient groups are represented by the PRG Members.

Our figures show a 0% PRG sign up for the White and Black Caribbean and White and Asian groups however this is due to the fact that PRG members have chosen to indicate their ethnicity as lying in the Asian/Asian British and Black/Black British categories; both these groups are well represented

Under 16s: This group are under-represented as they usually attend with an adult/guardian and their interest in participation has been low.

## **2 Agree areas of priority with the PRG**

#### **a. The areas of priority agreed with the PRG:**

The priorities were set as follows:

PRG members were asked to give consideration as to what they saw as the key priorities and most important issues when it came to looking at the services we provide for our patients. It was agreed that the focus should be on the following areas:

- how helpful our patients found the reception team;
- how easy it was to get through to staff/clinicians on the telephone
- how easy it was for patients to speak to clinicians on the telephone
- how easily it was to be seen urgently
- patients' preference for booking appointments (i.e. online, by phone etc)
- ease at which the patients can book appointments with the doctor of their choice
- satisfaction with the services offered (i.e. repeat prescription service)
- overall experience of the GP surgery.
- would patients recommend this practice?

**b. How the priorities were decided:** *Details of meetings, discussions, contact with patients outside the PRG*

**Email:** By direct email contact with the practice manager, Valerie Beard. Emails have been sent frequently during 2011-2013 to obtain the PRG patients' views on the introduction of a new service, for example the online appointment booking service. In addition, members were contacted to obtain their views on priorities for the survey to focus on.

**Meetings:** A meeting was held with the PRG members on 23 April 2012 to discuss the roll-out of the summary care records scheme. **(A copy of the minutes is attached.)**

**Newsletter:** A newsletter was produced and distributed electronically to all PRG members in October 2012. In addition a copy of the newsletter was available on the practice website. **(Copy attached.)**

### **3 Collate patient views through the use of a survey**

**a. When was the survey conducted?**

The survey for 2013 ran from 15 January to 1 March 2013:

**How was the survey distributed?** Using the following methods:

**Practice website:** The survey was published on the practice website. A prominent link was placed on the website's home page inviting patients to complete forms which were submitted electronically.

**Email:** All PRG members were contacted individually by email and advised that the survey was available and encouraging them to complete forms.

**Paper form:** Hard copies of the survey forms were made available in the surgery's waiting room on the front desk. As patients booked in for their appointments they were handed a form and asked if they would like to let us have their views.

**Clinicians:** The clinicians also assisted by giving out forms at the end of their patient consultations

#### **b. Which questions in the survey relate to the priorities in (2a)?**

All the questions relate to the agreed priorities (listed in 2a) and these are as listed below:

- how helpful our patients found the reception team;
- how easy it was to get through to staff/clinicians on the telephone
- how easy it was for patients to speak to clinicians on the telephone
- how easily it was to be seen urgently
- patients' preference for booking appointments (i.e. online, by phone etc)
- ease at which the patients can book appointments with the doctor of their choice
- satisfaction with the services offered (i.e. repeat prescription service)
- overall experience of the GP surgery.
- would patients recommend this practice?

#### **4 Provide the PRG with an opportunity to discuss survey findings and reach agreement with the PRG on changes to services**

##### **a. Describe the survey findings:**

The survey findings were analysed and the PRG members would be contacted on 19 March 2013 to share the findings with them and to ascertain their views on a draft action plan to address any issues. The survey findings are outlined below:

**Receptionists:** 81% of patients found the receptionists at the surgery very helpful and 15% described the receptionists as fairly helpful.

**Ease at getting through on the telephone:** 32% of the patients surveyed found it very easy and 52% found it fairly easy.

**Speaking to clinician on the telephone:** 46% of our patients hadn't tried to speak to a clinician on the telephone. However, 28% found it very or fairly easy.

**Seeing a GP urgently:** 75% found they could see a GP urgently, 13% said they couldn't see a GP urgently and 12% hadn't tried.

**Method of booking an appointment:** 38% booked in person, 68% by telephone and 26% by automated booking. Also 32% would like to see an online booking service.

**Seeing a particular doctor:** 63% said it took them 5 days or more to see their preferred doctor. This was rated as excellent to fair by 68% but poor by 16%.

**Seeing any doctor:** 50% of patients could get seen the same day or next day. 33% of patients were seen within 2-4 days and 12% within 5 days or more. 57% rated this as either very good or excellent; 29% as good or fair and 8% as poor.

**Ordering repeat prescriptions:** 73% rated this as very good or excellent; 12% as fair or good and 1% as very poor.

**Their overall experience:** 80% rated this as very good or excellent. With the remaining 18% as fair or good.

**Recommending the practice:** 78% would definitely recommend the practice and 16% would probably recommend the practice. 1% probably would not.

**b. Describe how the survey findings were reported to the PRG:**

Contact was made with all PRG members who were asked for their comments and feedback on the Action Plan. **A copy of the email sent to them and a file note showing their responses is attached for information.**

A meeting with the PRG members will be arranged for May 2013 to discuss ways in which we can try to meet the patients' wish to see a preferred doctor more quickly.

**c. Changes the practice would like to make in light of the survey findings: *list each survey outcome and the changes the practice would like to make.***

**Outcome 1: Receptionists/Ease at getting through on the telephone:** We believe that by introducing the electronic booking system whilst better advertising the telephone booking system, we can increase the percentage of patients who found it very easy to get through.

**Speaking to clinician on the telephone:** We plan to encourage/increase the patients who speak to clinicians on the telephone particularly as a large percentage of our patients haven't tried this service. This may also improve the access to the "preferred doctor".

**Seeing a GP urgently:** The majority of patients surveyed said that if necessary they could see a GP urgently. We plan to maintain this and/or increase this figure.

**Method of booking an appointment:** We plan to increase the ways of making an appointment – primarily by the introduction of the online appointment booking service.

**Seeing a particular doctor:** 63% of patients surveyed said it took them 5 days or more to see their preferred doctor. One of the partners, Dr Quigley, and the Practice Manager plans to meet with the PRG members to "brainstorm" on how best to decrease the number of days it takes to see a preferred doctor.

**Seeing any doctor:** 50% of patients surveyed said they could get seen the same day or next day. We plan to increase this figure by continuing to adapt the appointment system to make more appointments available without a long wait.

**Ordering repeat prescriptions:** 73% of patients surveyed rated this as very good or excellent. We plan to maintain/increase this, in part by the introduction of the electronic prescribing system.

**Their overall experience:** 80% rated the practice as very good or excellent. We hope to maintain/increase this figure by continually fine-tuning the service we provide to ensure we best meet the needs of our patients.

**d. Recommendations from the PRG based on the survey findings:**

**A copy of the PRG comments is attached;** the main feedback is as follows:

- Members felt it would be a good idea to hold a meeting to discuss how best to meet the request for patients to see their preferred doctors quicker.
- Members were happy with the actions outlined in the suggested action plan.
- Overall we received very positive response from the PRG Members.

**e. Agreement reached with PRG on changes to be made? Yes / No**

**f. Changes the practice cannot make, and the reasons why:**

Yes agreement was reached with the PRG on any changes to be made.

Although it may be difficult to meet patients' demands to see their preferred doctor in less than 5 days we intend to try and address this issue.

**g. Changes the practice will make:**

Introduction of an online appointment booking system

Introduction of an electronic prescription service

Better advertising of the telephone consultation service and of the automated booking system

## 5 Agree an action plan with the PRG and seek PRG agreement on implementing changes

	<b>Action</b> (change in practice)	<b>Person responsible</b> (to lead the change)	<b>Completion date</b> (when the change will be applied)	<b>Review</b> (what result the practice/patients saw as a result of the change)
1	Introduce online appointment booking service for the patients	Practice Manager	December 2013	
2	Introduce an electronic prescription service for the patients	Practice Manager	December 2013	
3	Publicise the telephone consultation with nurses/doctors service	Practice Manager/ IT Officer	February 2014	
4	Seeing a particular doctor. Explore ways of reducing the 71% of patients who said they wait 5 days or more to see a particular doctor	IT Practice Lead/ Practice Manager	February 2014	A meeting is planned for May 2013 to “brainstorm” with PRG members how best to meet the demand.
5	Publicise the automated phone booking system	Practice Manager/ IT Officer	February 2014	

### **Update on action plan for 2011/12:** *what result the practice/patients saw as a result of the change(s)*

**Action 1: Telephone number:** 77% of our patients identified the surgery’s 0844 number as an issue. To meet this we changed our number to an 01708 number in September 2012. Since then we have received no complaints about the cost of calls etc.

**Action 2. Ease at getting an appointment:** 79% of our patients found it fairly easy or very easy. Due to the new telephone system patients are finding it easier to get through (84% find it easy to get through to the reception team).

**Action 3: Surgery’s opening hours:** We increased the number of extended opening hours in 2012 to meet the increasing demand. (We plan to continue to provide extended hours appointments under the DES scheme from April 2013).

**Action 4: Access to “preferred” doctor:** We increased the availability of each of the partners to try to meet the requests of patients to see a “preferred” doctor. We plan to continue to work on this action point to try and increase the availability of access to patients’ “preferred doctor”.

## 6 Additional Information

### a. The opening hours of the practice premises and the method of obtaining access to services throughout the core hours:

#### Core opening hours:

Monday to Friday: 08.45am-6.30pm

#### Methods of obtaining access:

- By automated telephone system 24 hours a day/7 days a week
- In person – reception opened from 08.45-6.30pm daily – NB we do not close for lunch
- By telephone during core opening hours
- Repeat prescription service available 24 hours a week/7 days a week via our website
- Contact can be made by email 24 hours a week/7 days a week via our website
- From April/May 2013 we will be introducing the online appointment booking service.

### b. The times individual healthcare professionals are accessible to registered patients under an extended hours access scheme:

Extended opening hours (all nurses and doctors, apart from trainee doctors at present, participate in offering this service on the following days:

Monday to Friday 6.30pm-7pm

## 7 Publicise actions taken – and subsequent achievement

### a. Where the report is published:

The report has been published on the practice's website and also on the NHS choices website. Link is as shown below:

Signature of behalf of practice: \_\_\_\_\_

Name of signatory: Valerie Beard

Date: **25 March 2013**