

PATIENT PARTICIPATION

This year the practice has been consulting with patients to formulate a plan as to how to improve the service at the Health Centre. We have done this in two ways - by forming a Patient Reference Group (if you are interested in joining please contact the Practice Manager) and by conducting a survey of patients attending the practice.

Below is the report from this project and the action plan we intend to put into place.

PATIENT REFERENCE GROUP & PATIENT SURVEY REPORT AND ACTIONS 2011 – 2012

TYPE OF GROUP:

We decided to begin by forming a virtual group to communicate by email, and consider then arranging actual meetings if it seemed appropriate and helpful at a later date. This decision was for the following reasons:

We felt that an email group would be more inclusive – some patients could feel inhibited in being present at a meeting and feel concerned about confidentiality issues; if held in the daytime working patients would find attendance difficult; if held in the evening people could have childcare issues or might be concerned about security as the Health Centre is in a somewhat vulnerable position on a precinct with a pub directly adjacent.

We were also concerned about feedback from other practices who had tried to form actual groups in that meetings were only attended by a very few patients and the effort involved tended to mean the attendees often had specific issues which might not be representative.

We felt that if the virtual group reached a large size it might make inviting people to a real group more effective.

METHOD: April to Dec 2011.

Bearing in mind our practice profile – very much a white British majority – 82% - and the remainder being very much mixed across a lot of ethnic groups with no one group having a large number, and the age profile being weighted to younger age groups, we decided on a number of methods.

We placed a poster in the waiting area and the GPs gave out letters to all patients in surgeries – approx 150 were given out.

When we realised that the response rate was very low, and in order to make sure we had tried to include all groups, we drew up lists of patients in various minority groups – ethnic minorities, patients with mental health issues, learning disabilities, physical disabilities and the elderly, and sent individual letters to these patients. Another 100 letters were sent out but sadly this did not increase the response very much.

The poster remains in place and we are planning to have another push to increase the size of the group by placing survey results in the waiting area and inviting patients who have found this interesting to consider joining the group.

AREAS OF PRIORITY: Jan 2012

We made some suggestions of questions to the group based on previous surveys and on areas which patients have commented on in the past, then used the replies to construct the first survey.

Suggestions were made about access to appointments, telephone access, helpfulness of the reception team, quality of clinical care and confidentiality.

SURVEY

The survey was constructed and distributed to patients attending during the same 2 week period in February 2012. We intended to have 25 survey forms completed by patients who had seen each of the 6 doctors and each of the 3 nurses. One nurse was only here for part of the time so only had 19 forms – thus the total completed survey forms was 219.

We examined the results of the survey and picked out the areas that statistically were least satisfactory.

CONSULTING WITH THE GROUP:

We attached the results to an email and circulated it to the virtual group asking for their comments and help. Although the group is small we received some well thought through and constructive responses. We then used these, together with the main points raised in comments on the survey forms, to construct an action plan.

ACTION PLAN:

APPOINTMENTS

Waiting times for appointments:

At present we are not in a position to increase the overall number of appointments. Taking into account all the extras such as essential administration and continuing education our full-time doctors are working an average of 60 hours a week and we do not feel that it would be safe to try to increase the workload any further.

We do make use of locum surgeries to cover gaps.

We will look at ways of making our use of appointments more efficient and trying to reduce DNA's.

Early/late:

At present these appointments are only available on a Monday – we will look into adding other days and trying to ensure they are used by the patients for whom they are intended.

Saturdays:

We are already open on one Saturday a month under the extended hours scheme. It is clear from comments that this is not known by all our patients – we will advertise this more widely.

As most of the partners have school age children and we are not allowed to reduce our weekday appointments to take account of the Saturdays we have no plans to increase the number of Saturdays at present.

Waiting time to see doctor:

We will look into ways of informing patients on arrival, how long they may be kept waiting before seeing their doctor.

PRIVACY AND CONFIDENTIALITY**Checking in screen:**

This does display the patients name and date of birth and can be overlooked by someone waiting behind.

We will look into ways of changing the angle or screening to try to prevent this problem.

Verbal communication:

This is very difficult as the receptionists do have to check the patient's details to ensure mistakes are not made – we have an amazing number of patients with similar or even identical names and must also always bear in mind information governance so we have to know who we are talking to.

We will look into ways of improving this.

WAITING AREA

We fully agree this is looking tired and in need of refurbishment. We will look at ways of improving the environment and seating.

The Health Centre is open:

**Monday – Friday : 8.00 am – 6.30 pm
(Closed 12.30 – 1.30 pm each day)**

Additional appointments for people who are unable to attend during normal surgery times are offered on Monday mornings and evenings

7.30 – 8.00 am and 6.30 – 7.00 pm.

Plus one Saturday morning in each month : 8.00 – 10.30 am.

All additional appointments to be pre-booked in advance.

This Action Plan is being circulated to the Patient Reference Group and also added to the survey results and made available for distribution to all patients in the waiting area.