

PATIENT REFERENCE GROUP REPORT 2011-12

a. A description of the profile of the members of the PRG

The members of the PRG are patients registered at the practice and they represent a cross section of the practice population. The majority of members are of English ethnic background, between the ages of 25 and 45.

b. The steps taken by the contractor to ensure that the PRG is representative of its registered patients and where a category of patients is not represented, the steps the contractor took in an attempt to engage that category.

The practice have taken steps to ensure that the PRG is as representative of the practice population as possible. We had contact forms available at reception for patients to complete, staff would speak to patients personally and we used the patient display board to recruit patients to the group. We also asked mothers coming to post natal clinic to take part in the survey to target 25-35 year old females. We encouraged underrepresented groups such as the housebound, the epileptic and patients suffering from mental health disorders to take part in the survey by sending them letters asking to participate. Sadly the return was not what we would have liked.

c. Details of the steps taken to determine and reach agreement on the issues which had priority and were included in the local practice survey.

We had a meeting with our patients participation group who suggested themes for the survey. We also used themes from patient comments and suggestions.

d. The manner in which the contractor sought to obtain the views of its registered patients.

The questionnaires were handed to out to patients by reception staff, doctors and nurses. They were sent via the post to underrepresented groups of patients. From the list of all registered patients wishing to take part in the survey we selected a sample of 220 patients who we felt were most representative of our patient population.

e. Details of the steps taken by the contractor to provide an opportunity for the PRG to discuss the contents of the action plan.

The outcome of the survey was e-mailed to all patients who took part in the survey. They have been given an opportunity to comment on and discuss the findings of the survey and comment on our suggested action plan.

f. Details of the action plan setting out how the finding or proposals arising out of the local practice survey can be implemented and, if appropriate, reasons why any such findings or proposals should not be implemented

Main themes emerging from patient comments

- Reception staff very helpful and polite
- Telephone system has improved
- Nice new surgery building
- Very happy with care received from clinicians

- Unable to get through on the phone especially in the morning
- Not enough advance appointments available
- Wait time for the doctors/ nurse too long
- Website information is often out-of -date
- Would like to see more non-NHS health service options available in the surgery building i.e. acupuncture

Patient suggestions for improvement

- Perhaps introduce a queuing system so a telephone caller knows how long they have to wait
- To have more phone lines answered

Proposed changes by the practice

- Liaise with telephone system supplier to see if possible to introduce queuing system
- Maximum number of staff to answers telephones especially at peak times – this has already been the case but needs to be monitored
- To make more advanced appointments available
- To publicise via website and other means that the length of a routine GP appointments is 10 min but some cases may need longer especially if hospital needs to be contacted. Patients requiring a longer consultation can book a double appointment.
- Website to be regularly updated
- We already have physiotherapy and osteopathy services running from the practice premises and are in the process of liaising with other non-NHS services such as acupuncture to be hosted from practice building

g. A summary of the evidence including any statistical evidence relating to the findings or basis of proposals arising out of the local practice survey

Please see the pie charts below.

h. details of the action which the contractor,

i. and, if relevant, the PCT, intend to take as a consequence of discussions with the PRG in respect of the results, findings and proposals arising out of the local practice survey

Please see above under ‘Proposed changes by the practice’.

ii. where it has participated in the Scheme for the year, or any part thereof, ending 31 March 2012, has taken on issues and priorities as set out in the Local Patient Participation Report

Please as above under ‘Proposed changes by the practice’.

i. the opening hours of the practice premises and the method of obtaining access to services throughout the core hours

The Surgery is open on Monday, Tuesday, Thursday and Friday 08.30 – 18.30, Wednesday 08.30 – 16.00.

Patients can ring up between 8.30 and 10.30 for on the day appointments or after 10.30 for advance appointments. We also offer the use of our online booking system.

- j. Where the contractor has entered into arrangements under an extended hours access scheme, the times at which individual healthcare professionals are accessible to registered patients.**

Monday and Tuesday from 18.30 to 20.15 and Thursdays 18.30-19.15.