

**LONGROYDE SURGERY**

**PATIENT PARTICIPATION REPORT 2012-2013**

**Profile of the Practice and Patient Participation Group**

We are a well-established small practice with just under 3800 patients in the suburban area of Rastrick. A breakdown of the practice population is shown below.

The practice set up a patient group in 2005 but had not met for a few years. Following the launch of the Patient Participation Group Direct Enhanced Service, the group started meeting again at the end of 2011 and the practice are continually trying to attract a wider representative of the practice population.

The Patient Participation Group (PPG) now has 14 from the practice with an age range between 45 and 89 years. There are currently 9 females and 5 males in the group.

The practice continues to try and recruit more members for a mixed representation of the practice population and have taken the following steps:

* + Displayed posters within the surgery
  + Leaflets are available on the front desk
  + GPs have handed out leaflets to individual patients
  + Health Visitor has handed out leaflets to target younger parents
  + Poster and leaflets have been sent to Rastrick Children’s Centre
  + The practice website has a separate section for PPG with an online application form

This year, the group have met on 30th January and 20th March 2013.

Several members of our group have also attended Calderdale Health Forum meetings which gives practices a further opportunity to involve their PRG members in the wider agenda of the Clinical Commissioning Group.

The table below shows a breakdown of the practice population and the PPG by age, sex and ethnicity.

| **Practice population profile** | **PPG profile** | **Difference** |
| --- | --- | --- |
| **Age** | | |
| % under 16  **23%** | % under 16 | -23 |
| % 17 – 24  **11%** | % 17 - 24 | -11 |
| % 25 – 34  **12%** | % 25 - 34 | -12 |
| % 35 – 44  **15%** | % 35 – 44  **7%** | -8 |
| % 45 – 54  **16%** | % 45 – 54  **29%** | +13 |
| % 55 – 64  **12%** | % 55 – 64  **50%** | +38 |
| % 65 – 74  **7%** | % 65 – 74  **7%** | 0 |
| % 75 – 84  **3%** | % 75 – 84 | -3 |
| % over 84  **1%** | % over 84  **7%** | +6 |
| **Ethnicity**  Only 55% of patients have ethnicity recorded so these figures reflect that percentage of the registered population. | | |
| **White** | **White** |  |
| % British Group  **62%** | % British Group  **79%** | +17 |
| % Irish  **<1%** | % Irish  **21%** | +21 |
| **Mixed** | **Mixed** |  |
| % White & Black Caribbean  **<1%** | % White & Black Caribbean |  |
| % White & Black African  **<1%** | % White & Black African |  |
| % White & Asian  **<1%** | % White & Asian |  |
| **Asian or Asian British** | **Asian or Asian British** |  |
| % Indian  **<1%** | % Indian |  |
| % Pakistani  **<1%** | % Pakistani |  |
| % Bangladeshi  **<1%** | % Bangladeshi |  |
| **Black or Black British** | **Black or Black British** |  |
| % Caribbean  **<1%** | % Caribbean |  |
| % African  **<1%** | % African |  |
| **Chinese or other ethnic group** | **Chinese or other ethnic group** |  |
| % Chinese  **<1%** | % Chinese |  |
| % Any other  **<1%** | % Any other |  |
| **Gender** | | |
| % Male  **49%** | % Male  **36%** | -13 |
| % Female  **51%** | % Female  **64%** | +13 |
| **Differences between the practice population and members of the PRG.** | The group is aware that they are not representative of the practice population; however, a general invitation was issued to all registered patients via notices in the waiting room, personal invitations from staff and via the practice website. The practice will continue to seek new members from the under-represented areas over the next twelve months.  Since last year, the practice has recruited 3 male members to the group. | |

The Practice offered both a PPG and a virtual group on all literature. We have several members who are unable to attend meetings but exchanges views via email.

**Patient Participation Group Meeting – 30th January 2013**

Although attendance at this meeting was low due to illness, the group still discussed and agreed priorities for the year and included these in the local practice survey.

It was noted that since the last survey, the number of patients registered for the online service has increased by over 50% and more appointments are being booked online. The SMS text message service is working well and has reduced the number of “did not attendees”. However, the practice has noticed that many patients change their contact details and do not inform the surgery so the reception staff are routinely checking these details as patients contact the surgery.

The group agreed that access is still the priority for primary care. It was noted that there could be demand for more nursing appointments in an evening as patients are not always able to get out of work for routine blood pressure checks etc.

The group agreed that the local practice survey this year would include the same access questions as last year to see if there has been any improvement. The group also agreed to include the same questions around the website and the online service. As the Healthcare Assistant has almost completed her training, it was agreed that we would include questions to determine whether patients are aware of the services she can offer instead of the Practice Nurse. A question would also be included to see whether patients would recommend the surgery to family and friends.

**Local Practice Survey**

The “Improving Practice Questionnaire” was handed out by reception staff to all patients who attended for an appointment with the GPs, Practice Nurse and Healthcare Assistant for a full week commencing Monday 11th February 2013. 150 questionnaires were distributed and 147 were completed and returned (98%).

The practice population is just under 3800 patients and the practice received a total of 147 completed questionnaires. (This exceeds the requirement of a minimum 25 completed questionnaires per 1000 practice population).

The questions were also added to an online survey on the practice website [www.longroydesurgery.nhs.uk](http://www.longroydesurgery.nhs.uk) for patients to complete during February and March.

**Survey Results and Action Plan 2012-2013**

The results were collated into graph form and a copy was sent to each member of the PPG. A poster was displayed in the waiting room advising patients that the results were available to view together with an invite to join the PPG and attend the meeting in March. A paper copy of the results was placed in the waiting room for patients to view and the results were also displayed on the new notice board in the entrance hall. The results graph was also added to the practice website.

A meeting of the Patient Participation Group was held on Wednesday 20th March 2013 and 7 members attended along with 3 GPs and the Practice Manager.

The following points were discussed and an action plan agreed.

|  |  |  |
| --- | --- | --- |
| **Question** | **2013** | **2012** |
| Appointment access very easy or fairly easy | 95% | 97% |
| Able to get an appointment with doctor of choice very or fairly easily | 89% | 92% |
| Aware can book appointments online | 69% | 36% |
| Aware can order repeat prescriptions online | 70% | 44% |
| Have viewed the website | 34% | 21% |
| Awareness of Healthcare Assistant | 44% | Not asked |
| Aware what appointments Healthcare Assistant can offer | 25% | Not asked |
| Would recommend surgery to family and friends | 96% | Not asked |

The group felt the results of the surgery were good and asked what the practice’s view was. The practice feels the results generally reflect the service we are trying to achieve but we do get upset by the negative comments. It was agreed that we should focus on the positive that 96% would recommend the surgery to family and friends rather than the 4% that wouldn’t.

Many of the group prefer to telephone the surgery to book appointments and order repeat prescriptions. The practice feels that we are flexible to patients in that we offer personal face to face or telephone contact but also the online facility for those who choose to use it.

The question was raised; do we benchmark our results with other surgeries? Dr Brook responded that we do measure our access against other practices and in particular with Brigroyd Surgery in Ripponden who offer a similar level of access to us.

With regards to services available for patients at the practice, we feel that as a small surgery we offer all we can in the space available and have never received negative feedback for not being able to offer a particular service.

The group noted that the results highlighted that patient awareness of the Healthcare Assistant and what she can offer is low. It was agreed by the group that raising the awareness of the Healthcare Assistant would be a priority for the practice this year and will be included in the action plan.

The question” Is there pressure to merge the surgery with others to make a “super practice”?” was raised and what could the group do to prevent this happening. Dr Grant commented that a few years ago there was a possibility of a “super practice” in Brighouse and some of the other local surgeries were keen to join, however, Longroyde Surgery was and is still not interested in merging.

Dr Brook again emphasized our excellent access and he constantly tries to get other practices to adopt the same approach as us. He believes patient satisfaction is better in a small practice and asked the group to extol the virtues of a small practice to others. The group expressed their gratitude that they can get an appointment easily when they hear stories from friends about access at other practices.

The practice is currently looking to buy a new telephone system and the group was asked if they would prefer the automated answer service e.g. press 1 for appointments etc. The group all agreed that they still prefer the personal approach of being connected directly to a member of staff. The group still does not want the practice to install a “patient call board” as again they like the personal approach.

The Practice Manager was asked if we monitor the rate of “non attendees” for appointments. She confirmed we do and we have noticed a reduction since we started the SMS text reminder service. Dr Brook also commented that offering immediate access also reduces the number of missed appointments.

A concern was raised that sometimes an item is not added to a patient’s repeat list and they then have to come back in to see a GP before they can get another prescription. The practice recognises that items are not always put on repeat when they should be and are addressing this.

The question as to whether some of the trees in the car park could be removed was raised again and it was agreed that this would be taken forward and included in the action plan. The removal of trees could increase the number of car parking spaces and make access into the car park easier.

One group member mentioned that the front desk is a bit open and patients waiting can hear what is being said. The practice is aware that the area is not very private however we do have a hatch in the entrance hall or patients can ask to speak to the receptionist away from the front desk if they wish.

Action plan agreed:

1. The practice will increase the awareness of the Healthcare Assistant and promote the appointments that she and the Practice Nurse can carry out. This will be done by displays and posters within the surgery, messages on prescriptions and by word of mouth by staff.
2. The practice will investigate if any of the trees in the car park can be removed to allow better access.
3. The practice will continue to promote the website via displays on the new notice board in the entrance hall and via flyers on the reception desk. The practice will continue to provide topical information via the website.

**Progress made with the Action plan for 2011/12**

|  |  |  |
| --- | --- | --- |
| **You said…** | **We did…** | **The result is…** |
| 12% of patients surveyed had missed appointments due to forgetting. | The practice promoted the SMS text messaging service to try and reduce the number of missed appointments. | An audit has shown a 30% reduction in the number of missed appointments since December 2011. |
| 61% of patients surveyed did not know that appointments can be booked online | The practice raised awareness of SystmOnline via a display in the waiting room and leaflets explaining the service | The number of patients registered for SystmOnline has increased by 38% between December 2011 and December 2012. |
| 52% of patients surveyed did not know that repeat prescriptions can be ordered online | The practice raised awareness of SystmOnline via a display in the waiting room and flyers on the reception desk leaflets explaining the service | The number of patients registered for SystmOnline has increased by 38% between December 2011 and December 2012. |
| 76% of patients surveyed had never viewed the practice website | The practice raised awareness of the website via a display in the waiting room and flyers on the reception desk. | The practice will continue to promote the website via displays within the practice and flyers on the reception desk. The practice will continue to provide topical information via the website. |

**Action plan 2012/2013**

|  |  |  |
| --- | --- | --- |
| **You said…** | **We will…** | **The result will be…** |
| Only 44% of patients surveyed are aware that we have a Healthcare Assistant | The practice will promote awareness of the Healthcare Assistant and the type of appointments she can offer | Greater awareness of Healthcare Assistant which may reduce the number of patients who book in with the Practice Nurse instead of the Healthcare Assistant |
| The trees in the car park are obstructive and if removed more car parking spaces could be made | The practice will investigate if any of the trees in the car park can be removed to allow better access | Easier access in and out of the car park and possibly an extra parking space |
| Only 34% of patients surveyed had used the practice website | The practice will continue to promote the website via displays on the new notice board in the entrance hall and via flyers on the reception desk. The practice will continue to provide topical information via the website. | More patients will be aware of the surgery website and the topical information will be updated regularly |

**Confirmation of the practice opening times**

Feedback from the survey confirmed that the practice offers excellent appointment access and the results show that tightly managing appointment demand is successful.

**The surgery opening hours are Monday – Friday 8.30am – 6.30pm.**

Patients can contact the surgery by telephone during these hours or call in person. The practice does not undertake extended access.

Our opening hours are displayed on the surgery front door, on the front cover of the practice leaflet and on both the practice website ([www.longroydesurgery.nhs.uk](http://www.longroydesurgery.nhs.uk)) and the NHS choices website ([www.nhs.uk](http://www.nhs.uk)).

**Availability of information**

A copy of the survey results and this report has been sent to:

All members of the PPG either via e-mail or by post

A copy of the survey results and this action plan is available:

In the waiting room for patients to view

On the practice website (www.longroydesurgery.nhs.uk)

The minutes of the PPG meetings are available on the practice website (www.longroydesurgery.nhs.uk)