Royal Crescent Surgery Local Patient Participation Report March 2012

The Practice has started a Patient Reference Group (PRG).

The aim of this group is to identify areas where the practice can improve or change, to help set goals and produce positive results. The group identified priority areas for possible change, on which a patient survey was based. Using the results of this survey and their own views the PRG agreed with the practice an action plan.

A report on this process and the final agreed action plan are below. We hope you find it interesting.

Type of PRG

We chose to create our group as a virtual group to be able to find out the opinions of as many people as possible. We also offered patients the opportunity to be contacted by post or to speak to someone in person. At present the leader and co-ordinator of the group is the Surgery Manager.

Creation of the PRG

A leaflet explaining the PRG and sign up form were created and the group was advertised in a variety of ways to engage a representative group of patients. This included making leaflets and forms available in many places:

- On our website
- In surgery available to pick up
- In surgery offered out in person by reception staff and actively encouraging patients to join
- Sent out with letters
- Given out with all prescriptions
- Local Chemist
- Local community centre
- All flu clinics

Profile of the PRG

To date 54 people have joined the PRG. To test how representative this group is of our practice population we have drawn information from our own records and From "Knowing our communities" (KOC) produced by the local authority containing census details for our local area.

Category	KOC for Melcombe	PRG – total PRG size 54	PRG as a percentage
	Regis		
Male	52%	23	43%
Female	48%	31	57%
Age 0-60	74%	11	20%
Age Over 60	26%	43	80%
Ethnicity White British	94%	51	94%
Ethnicity Other	6%	3	6%
Carers	1% (information from	6	11%
	practice records		
Long term condition	29% (information from	6	11%
	practice records)		
Learning Disabilities	2% (information from	0	0
	practice records)		
Residential homes	2% (information from	0	0
	practice records)		

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Steps to be taken to develop a PRG that is representative of our practice population

The practice area is dominated by younger people. It is an area of high deprivation, with lower levels of education amongst the population and high levels multiple occupancy housing. There is a high level of unemployment. The majority ethnicity is white British. Mental health conditions and drug and alcohol dependency are higher than elsewhere in Weymouth and Portland, reflecting the high levels of unemployment amongst patients of working age. The Practice also has a high number of patients registered with learning disabilities.

The Royal Crescent Surgery registration figures show that 71% of patients are aged 0-60 years and 29% of patients are aged over 60. The current PRG profile is more representative of patients over 60. This means that for the PRG to be truly representative we need more members under 60 years old to join.

The make up of our PRG broadly reflects the practice population but there are some under represented groups that we are keen to engage more with.

Objectives

- > Engage with more under 60's
- > Engage with LD groups to try and find representatives
- > Engage with residential homes
- > Engagement with drugs and alcohol groups

Action Taken

GPs were asked to considered which patients may be interested and have written to them directly to invite them to join the group. The Surgery Manager has liased with People First Dorset to invite them to join the group, with suggestions of alternative methods of communicating with us where appropriate. The Surgery Manager will be visiting the day centres where learning disability patients attend to try to establish relationships and encourage some of them to join the PRG. One of the PRG members has a nursing background and experience of working with people with learning disabilities, and has offered to help if possible. Our Community Matron will liaise with residential homes inviting patients to join the group. The lead GP for Genesis has spoken to some patients but so far no-one wishes to join.

Steps taken to determine the priority issues for inclusion within the surgery survey

The PRG invitation asked patients to choose 3 priority areas from a selection of 9 – one of which was "other" to enable patients to suggest their own ideas. The responses were collated and the 3 most popular priority areas were chosen as the areas on which our first survey was based.

Priority Areas	Number of patients selecting this
	area
1. Getting an Appointment	22
2. Length of time waiting in the practice	13
3. Availability of specific clinics	20
4. Patient information on illness prevention and staying healthy	22
5. Waiting room facilities	7
6. Prescriptions and medication	17
7. Telephone answering and access	12
8. Opening times	5

How we sought the views of our patients – the survey

We have past experience of producing our own surveys and gaining valuable information; we chose to do this again. Questions were based on existing validated surveys such as those on the NAPP website, previous surveys used by this practice and the NHS national survey. 2 PRG members were asked to review and comment on the survey before it was distributed. One of these works within the NHS as an IT Analyst and has experience of surveys. The email survey was tested on one of the PRG members before it was sent to the whole group. Surveys were given to all members of the PRG and 300 other patients (based on the numbers used for previous surgery surveys). Surveys were given out in a variety of ways over a 2 week period in early January 2012:

- Via email (or by post for those who have requested this)
- In person when collecting prescriptions / coming for an appointment
- By post with all letters
- The opportunity to complete a survey verbally

Report of Survey Results and Action Plan

Members of the new PRG (54) and 300 other patients who came into the surgery during the second week in January were asked to complete the survey. 162 completed surveys were received back (46%). Multiple comments were received. 81 positive, 51 suggestions and 3 negative.

It was recognised that this survey did not reach a sample of patients who do not attend the surgery very often. With the help of the PRG an action plan will be formed to address this issue in time for the next survey.

The survey results were analysed by collating the number of answers to the various options for each question. These figures were then expressed as a percentage of the total number of answers received. Common themes were then identified from this analysis and the additional comments received.

Themes resulting from this survey

Getting an appointment / telephone answering and access

- Telephone answering at 8.30 in the morning needs to be improved
- Some patients are not aware that they can book in advance
- Some patients would like to be able to book a longer appointment time with their GP
- Information on waiting times in the surgery

Patient information on illness prevention and staying healthy

- Better use of technology, online appointment booking and better use of email
- Notice boards with useful displays and leaflets in the waiting room

Steps taken to provide an opportunity for the PRG to discuss survey findings.

Meeting with PRG Representatives

The surgery manager met with 4 of the PRG representatives to discuss initial survey results. Some of this meeting was filmed by the BBC One Show and aired on national TV on 23rd January 2012. It was clear during the meeting that face to face communication with patients offers the opportunity to discuss and understand the patients' point of view as well as patients understanding some of the constraints the surgery faces. Together the group identified that there is a need to communicate with patients who do not regularly come into the surgery. The group was asked for ways of doing this without sending expensive mailshots regularly. It was suggested that a volunteer group could help to deliver newsletters in the local area. A water dispenser in the waiting room was suggested and also emailing information to those who would like it. Whilst the survey indicated that some patients wish to make better use of information technology and would like to book online appointments, some of the PRG representatives said that they would always prefer to speak to a receptionist. The self check-in system was discussed and again, some patients prefer to use it and some like to speak to a receptionist. It was agreed that offering a choice to patients is the best way forward.

The One Show Star Rating Poll

With consent of the surgery and patients, 20 patients were asked to rate the surgery in terms of stars after their visit, 1 star being poor and 5 stars being outstanding. 4 patients gave the surgery 4 stars and 16 patients gave the surgery 5 stars. This was a fantastic result for the surgery. These results will also be discussed with all members of the PRG.

Discuss Survey findings with all PRG Members

The survey findings, together with suggestions for actions, were emailed (or posted where appropriate) to the PRG for their comments. The PRG was also invited to discuss the findings with the Surgery Manager either in person or on the telephone. 9 members (17%) contacted the surgery via email, letter or phone to discuss the survey findings and to offer their suggestions around the proposed actions.

Some members also suggested that they could, for example, deliver a regular newsletter to neighbours and other contacts therefore increasing contact with patients who do not often visit the surgery. One PRG member has a nursing background and another has good IT skills. Both have offered their skills and experience if appropriate in the future. Some group members are very happy to come in for meetings to discuss ideas and ways forward.

Action Plan

Following the above consultation with the PRG a final action plan was produced and sent by email (or post where appropriate) to the PRG for agreement, highlighting where changes to the proposed actions had been made following PRG feedback. The action plan was then ready for implementation.

The Local Patient Participation Report, including the Action Plan, will be widely publicised:

Practice Website

Email to PRG members

Copies available in Surgery and a visible poster advertising this

Summary in the surgery newsletter (with the invitation to ask for a full copy). The newsletter will be available in Surgery and handed out with all prescription and sent with all correspondence.

Copies available at the local Chemist

Practice Opening Hours

The surgery is open from 8.30am to 6.30pm Monday to Friday. Throughout these hours patients can access services on the phone, in person by visiting the surgery or by surgery staff visiting them, electronically via email or the website, by post or through an appropriately authorised third party representative. Appointments with healthcare professionals are available from 8.30am to 11.40am and in the afternoon from 3pm to 5.10pm (3.30pm to 5.40pm on a Monday).

The surgery also provides extended hours appointments with a GP on a Monday evening until 8pm and on most Saturdays from 8.30am-12pm.

Appendices

- Appendix 1 PRG leaflet
- Appendix 2 Link to "Knowing Our Communities"
- Appendix 3 Comments received under "other" when agreeing the priority areas for inclusion within the survey
- Appendix 4 The survey questions
- Appendix 5 Survey results analysis summary sheet
- Appendix 6 Report of survey findings and proposed action plan for consultation with the PRG
- Appendix 7 Final agreed Action Plan