

Ash Grove Medical Centre

Patient Reference Group Summary Report 2012 - 2013

Introduction

This report shows how we continue to recruit Patient Reference Group members and how the current group compare to our practice profile.

It will demonstrate how the patient survey was devised for 2012/2013 and how we obtained patients feedback. It will show how the results were published and shared with our registered patients.

From the patient survey it will show what action plan has been put in place to deal with any issues arising from the patient survey.

For a copy of the full report including appendices please write to Michael Hart, Ash Grove Medical Centre, England Lane, Knottingley, WF11 0JA and this will be organised.

Practice Profile

The practice area

Knottingley is a small industrial town situated in the lower Aire Valley on the south bank of the river Aire. It is an area of high deprivation with a high level of respiratory disease which may be due to its mining and industrial background. Due to the current climate unemployment is also at a high level.

The town mainly consists on White British, and the table below gives some indication of the patient profiles:

Practice population profile		PRG profile		Difference
Age				
% under 16	17.8%	% under 16	0%	-17.8%
% 17 – 24	10.7%	% 17 – 24	0%	-10.7%
% 25 – 34	12.1%	% 25 – 34	0%	-12.1%
% 35 – 44	13.6%	% 35 – 44	0%	-13.6%
% 45 – 54	14.5%	% 45 – 54	0%	-14.5%
% 55 – 64	13.2%	% 55 – 64	18%	4.8%
% 65 – 74	10.1%	% 65 – 74	82%	71%
% 75 – 84	5.9%	% 75 – 84	0%	-5.9%
% over 84	2.2%	% over 84	0%	-2.2%

Practice population profile		PRG profile	Difference
Ethnicity			
White		White	
% British Group	80%	% British Group 100%	100%
% Irish	<1%	% Irish	
Mixed		Mixed	
% White & Black Caribbean	3%	% 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	
% Pakistanin	6%	% 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	7%	% Any other	
Gender			
% Male	50.3%	% Male	
% Female	49.7%	% Female	
Differences between the practice population and members of the PRG.			

Recruitment

The PRG group was established via the Ash Grove newsletter that is published on a quarterly basis. We are always aiming to recruit patient representatives from different backgrounds and following a recruitment campaign last year we recruited three new members who have joined the group in July 2012.

Recruitment work planned for 2013: -

1. To visit local schools and provide information leaflets to parents to encourage engagement with the group.
2. To continue to advertise in the patient waiting area using posters/leaflets.
3. To continue to provide patients with information via our reception team.
4. To continue holding discussions with patients who have had complaints/concerns about the practice.
5. To advertise via our waiting room screen using power point presentations.
6. To continue advertising via our practice website.

A virtual patient group was considered last year. Following advertising this was not established due to little interest. We aim to re-visit this and discuss the possibility of a virtual group with local community groups which cater for the younger end of the population and via local schools engaging with parents.

Terms of Reference

The terms of reference were reviewed during May 2012. These terms highlight what is expected from a patient representative, attendance arrangements to meetings, who to contact if you cannot attend meetings etc.

Achievements of the group during 2012

Review of Practice leaflet

The groups views were obtained when the practice were due to redesign the practice leaflet. They came up with a number of points to raise in the leaflet and helped to make the leaflet more user friendly to patients.

Review of Practice processes

The group continue to review every day processes including our appointment system. Access to GP services, practice premises, prescription service etc. The group help with this process identifying any possible problems from a patient perspective.

Commissioning awareness

The group are keen to keep a breast with the upcoming changes to the NHS. We have discussed commissioning and how the PRG group can have a positive impact with re-design of services. Outside speakers have attended the group to provide useful information about our CCG and its constituents.

Patient survey 2012

During August and September 2012 meetings the survey questions were discussed and finalised. The group agreed that the following areas would be covered in the survey:

1. Access to GPs/Nurses
2. Accessing a particular GP
3. Practice premises
4. Surgery opening times

5. Extended hours – Reviewing patients preferences
6. Experience of waiting at the practice
7. Satisfaction with the service provided by Ash Grove
8. Awareness of telephone consultations.

As a group we established that the survey would take place in October 2012 and that the patient group would manage the process of handing out/collecting in of the questionnaires. This was very effective and the practice received a good response rate. 500 questionnaires were handed out and we had a response of 347 which was an increase over last years successful survey.

The results were collated and discussed in January 2013. From the results an action plan was drawn up and agreed.

Feedback methods were agreed and the following methods were used to distribute information about the patient survey results and action plan for 2012/2013

- Information in the patient newsletter.
- Practice website (www.ashgrovesurgery.co.uk)
- A display on the patient reference group notice board in the waiting room.
- Power point presentation on the screen in the waiting room.

Agreed Action Plan from the Survey

From the patient survey 2012 the following actions have been agreed and shared with patients.

You said...	We did...	The result is...
<p>You said about the 0844 telephone number:</p> <ul style="list-style-type: none"> - Telephone difficult, high charges. - You don't agree to pay for an 0844 call. - Phone calls too expensive and queues too long. 	<p>The telephone system was reviewed with a number of providers.</p> <p>We have signed up to revert back to a local number.</p> <p>Reviewed the telephone options to ensure patients are dealt with quickly and effectively with reduced queuing times.</p> <p>Reviewed staffing levels to ensure adequate staff are available to answer your call.</p>	<p>That from 15th April 2013 the practice will have a New phone number: 01977 673141 and the 0844 number will be abolished.</p> <p>New options on the telephone system will be available from 15th April 2013.</p> <p>Dedicated reception staff will continue to answer you calls as quickly and efficiently as possible.</p>
<p>Awareness issue:</p> <p>The results identified that you were not aware of telephone consultations being available to patients.</p>	<p>To provide patients with an easy to read leaflet explaining the different types of appointments available to patients.</p>	<p>To devise the leaflet alongside the PRG group.</p>

<p>Test results:</p> <p>You said you would like to see improved waiting times for results and better communication methods and feedback with regard to test results.</p> <p>You said you would like to be provided with more information about why a test result may be required.</p>	<p>To review the process for patients receiving information regarding their results of tests.</p> <p>To review the current system in place for communicating with patients with regard their test results.</p>	<p>Letters sent out from the practice regarding test results are being reviewed with the PRG group to provide more information regarding why you may require a test or re-test.</p> <p>To review the system on how patients receive their test results. (To discuss with PRG group) at a future meeting.</p>
<p>Recall systems:</p> <p>You said you would like to be informed via text about your appointment.</p>	<p>To update our records and ensure we have an up to date mobile number for you.</p> <p>To start text reminders for specialised clinics.</p> <p>To look into text reminders for future appointments.</p> <p>To review reminder systems in place for patients who have no access to mobile phones.</p>	<p>To ensure the receptionist obtains up to date mobile numbers via face-to-face encounters and telephone encounters with patients.</p> <p>To set up a text facility to provide patients with reminders regarding their appointments.</p>
<p>Blood clinics:</p> <p>You said you would like to have a blood test without having to wait or come back.</p>	<p>To look into open surgeries for blood tests.</p> <p>To identify and trial an open blood test clinic which will mean you can come and wait without having to have an appointment for a blood test.</p>	<p>To identify a specific time during the week to hold an open blood clinic.</p> <p>To trial the system for a 3-month period.</p> <p>Start date: End of May 2013.</p>

Confirmation of Opening Hours

The surgery opening hours are displayed in the following areas:

1. Patient leaflet
2. Displayed in the patient Waiting room
3. Quarterly newsletters
4. On the practice website (www.ashgrovesurgery.co.uk)

Extended hours

The extended hours were reviewed within the patient survey 2012. The survey asked patients where they would like extra services, early morning, late evening or weekends. The results showed that you were satisfied with the current arrangements.

Extended hours are available outside core hours, on a Monday, Wednesday, and Thursday at 07:00-08:00 in a morning and 18:30-20:00 in the evening on a rota basis (This does not include Bank holidays). These appointments are for GPs only.

Core Opening Hours

Ash Grove Medical Centre

Monday – Friday 08:00 – 18:30.

Extended hours (outside core hours)

Monday	07:00 – 08:00	&	18:30 – 20:00
Tuesday	07:00 – 08:00		
Wednesday			18:30 – 20:00
Thursday			18:30 – 20:00

Final comments

The practice has a very effective patient participation group that has achieved a number of goals since coming together back in 2009. It is hoped we can establish a virtual group to achieve more goals in the future.