



Dunelm Medical Practice Patient Participation Report 2012/13

March 2013

Introduction

The purpose of the Patient Participation Directed Enhanced Service (DES), commissioned by North East Primary Care Services Agency on behalf of NHS County Durham & Darlington is to ensure that patients are involved in decisions about the range and quality of services provided and, over time commissioned by their Practice.

It aims to encourage and reward Practices for routinely asking for and acting on the views of their patients. This includes patients being involved in decisions that lead to changes to the services their practice provides or commissions, either directly or in its capacity as a gatekeeper to other services.

The DES aims to promote the pro-active engagement of patients through the use of effective Patient Reference Groups (commonly referred to as PRGs) or Patient Participation Groups (PPG) to seek the views from Practice patients through the use of a local practice survey.

The outcomes of the engagement and the views of patients are then required to be published as a Report on the Practice website.

A description of the profile of the members of the PPG:

The current PRG membership is neither reflective nor representative of its practice population. The practice has found that the current membership reflects the types of patients who have a certain level of confidence and free time and have the flexibility about working and earning money.

There are 7 'physical' PRG members within the group. There are 4 male and 3 female representatives.

Age profile:

1 x member : 46-55 years

2 x members: 56-65 years

4 x members: 66+ years

The practice has considered evening meetings to attract patients who are either in education, have children of school age or are working. Unfortunately patients such as children/young people, carers, and parents with small children in particular have not come forward or are able to offer their time.

A description of what steps the Practice has taken to ensure that the PPG is representative of its registered patients and where a category of patients is not represented then what steps have been taken by the Practice in an attempt to engage with those patients:

Dunelm Medical Practice had a pre-existing PPG but has attracted new and 'virtual' members to the group by publicising its meetings through its website, notice boards, display leaflets etc in and around the practice. The Practice has tried to target specific registered patients, particularly under represented groups through various means but been unsuccessful to date, despite our efforts.

The Practice has made use of its text messaging service to patients. However, the practice has found that targeting patients, who are either in education or in employment, are not able to offer their time to attend meetings. It has encouraged patients to join its virtual PPG group.

The Practice has to put together an information pack to invite the views of patients and gives them an opportunity to raise issues about their own care and treatment as well as any issues of concern through a patient leaflet/flyer.

A description to be entered in around how the Practice and the PPG determined and reached an agreement on the issues which had propriety within the Local Practice survey:

The practice was very keen in engaging patients to help deliver and design services around the needs of its patients.

The Practice analysed its national Patient Survey results for 2011-12 in order to ascertain where it performed below PCT average.

We were keen to 'go back to basics' and look at issues regarding their patient experience with regards to appointments, telephone access, seeing a GP of their choice. A view of what the patients at Dunelm Medical Practice think about the services it receives from the GPs, Nurses and staff. The Practice had also used feedback from complaints, significant events, comments and suggestions to help inform some of the priority areas.

The above issues had previously been discussed at PPG meetings and the members agreed that it would like to survey patients on these issues, which were included in the survey.

A description of how the Practice sought to obtain the views of its registered patients

The practice used a well established questionnaire, the Improving Practice Questionnaire (IPQ) which is widely used in the UK and presented it to the PRG for comment during its October meeting. This confirmed the questionnaire was suitable and met the areas/priorities to be included within the survey. The Group supported the use of the within the Practice.

Prior to the survey, the practice displayed posters in and around each of its three sites informing patients that a survey would be undertaken and how long it would last.

Patients were asked upon arrival to the surgery if they would be happy to participate in the survey and the reception staff assisted patients when they were asked. The Practice looked at targeting various groups of patients and different times of the day (baby clinic, chronic disease clinics, flu clinics and general routine appointments with GP/Nurses).

The survey was conducted during the month of January 2013. Questionnaires were completed by patients and returned to the Practice via sealed boxes in each reception area. A total of 384 questionnaires were completed and sent for analysis resulting in a report of the findings.

How the Practice sought to discuss the outcomes of the local survey and the Practice's action plan together

The practice outsourced the analysis of the survey to CFEP UK surveys; the findings were presented in a report and poster which pinpointed the areas where the Practice had scored well and also those areas where improvements might be needed.

The Practice have put bound copies of the survey findings in the waiting areas of its three sites to share the results with its wider patient population, as well as posting it on our website in February 2013.

The survey results were sent out to the group one month prior to the meeting taking place. This was to allow its members time to thoroughly read the results in advance of the meeting and resulted in a more meaningful discussion.

The results were discussed in detail, which enabled the PPG to compile an action plan based on the findings/results. The Practice was able to agree an action which was approved by the group at its meeting held on 25th March 2013.

A description of the findings or proposals that arose from the local Practice survey

Patients were asked a total of 28 questions (a copy of the questionnaire is attached for reference) with regards to the practice; the practitioners; the staff and areas around complaints, illness prevention and reminder systems.

The Practice received many comments regarding the access to a GP / the appointment system, problems in getting through to the practice first thing in the morning and problems experienced in getting an appointment with a GP.

Responses found to be positive

Always shown respect and care by everyone.

High Standard of care provided

No complaints – happy with the service

Responses found to be least positive

Premises – Waiting areas are in need of a re-vamp, looks tired and dated

Access to GPs / Appointment system – seeing the GP of your choice, need to be able to book appointments in advance instead of having to wait weeks to get an appointment but patients also wanting more book on the day appointments. Time patients are waiting in the waiting area due to clinicians running over. Requests to change/improve the appointment system.

Customer Services – Staff Attitude, inconsistent approach across all staff groups (GP's, Nurses & Receptionists)

A summary of any evidence including statistical evidence relating to the findings or basis of proposals arising out to the local Practice survey:

Please refer to IPQ document for statistical analysis of responses.

- Patients gave a positive response to their overall satisfaction with opening hours
- Patients felt they were treated with Dignity and Respect
- Patients said the Doctors were good at giving enough time, listening and treating them with care and concern

- Some areas for improvement were:
 - Patients said that they had been unable to be seen by a GP within 2 working days
 - Patients said that they were unable to see the practitioner of their choice
 - Patients find the telephone systems either difficult or very difficult to get through on

A description of the action which the Practice, the PCT intend to take as a consequence of discussions with the PPG in respect of the results, findings and proposals arising out of the local Practice survey.

The PPG have identified the following priorities:

Premises
Access / Appointment System
Customer services

An action plan details the recommendations/priorities identified by the PPG/Practice.

A description of the opening hours of the Practice premises and the method of obtaining access to services through the core hours:

Dunelm Medical Practice is open Monday to Friday 8.30 – 18.00. The practice provides extended hours on Monday evening 18.00 – 21.00, at its Framwellgate Moor site, both a doctor and a nurse are available. This enables patients (particularly those in education/working) to access appointments at a later time. From November 2012 to April 2013 the practice have also taken part in a winter pressure pilot, whereby our Framwellgate Moor site has been open Saturday mornings from 8am to 1pm.

Patients can make appointments by telephoning or calling in to the practice to make an appointment. The Practice also offers online facilities, to enable patients to request repeat prescription and appointments via its secure website.

The practice has text messaging facilities to remind patients of their appointment, opening hours during holiday periods, as well as providing health promotion messages.

A description of any extended opening hours that the Practice has entered into and which health care professional are accessible to registered patients.

The practice provides extended opening hours on Monday evenings (18.00 – 21.00). These are pre-bookable and book on the day appointments. The healthcare professionals available during these sessions are a GP and a practice nurse.

From November 2012 to April 2013 the practice have also taken part in a winter pressure pilot, funded by North Durham CCG, whereby our Framwellgate Moor site has been open Saturday mornings from 8am to 1pm.

**Improving Patient Satisfaction
Practice Action Plan**

Area for Improvement	Recommendation	Action required	Timescale
Appointment System	<ul style="list-style-type: none"> Ability to book appointments <u>at least</u> 4 weeks in advance 	<ul style="list-style-type: none"> Practice to produce rotas <u>at least</u> 4 weeks in advance and make them available on the clinical system 	0-3 months
Access	<ul style="list-style-type: none"> Increase appointment availability across all clinical services Support patients to understand which clinician they can see with which ailment 	<ul style="list-style-type: none"> 6 week baseline assessment of demand to be carried out across each site Findings to be shared with PPG to discuss next steps Develop a signposting leaflet / poster to help educate staff and patients 	<p>Ongoing</p> <p>0-3 months</p>
Premises	<ul style="list-style-type: none"> Internal decoration External decoration 	<ul style="list-style-type: none"> Rolling programme for property maintenance agreed across all three sites Local art work to be hung in each reception area 	<p>3-6 months</p> <p>6-9 months</p>