

# **GRANGE PARK SURGERY**

## **LOCAL PATIENT PARTICIPATION REPORT**

**Date: February 2012**

## **1. Introduction**

The Patient Participation Group (PPG) at Grange Park Surgery was established in 2009 with the first open meeting in October. At this meeting, a group of six patients volunteered to form a steering group, later called the Patient Participation Group, to organise open meetings, and pass the views, ideas and suggestions arising from the meetings on to the doctors. The numbers of patients on the PPG has now increased to ten.

The group has agreed a formal Constitution comprising Terms of Reference, which are reviewed annually.

The group meets every six weeks for 1 to 2 hours in the house of one of the members during an evening. Agendas and supporting papers are distributed to members in advance to allow time for them to be read in preparation for the meeting. Members are asked to forward their apologies to the PPG Secretary if for any reason they are unable to attend.

The PPG organises a quarterly open meeting for any patients wishing to attend to raise any issues for discussion. There is also a speaker arranged for the meeting which is publicised in the practice and round the village in advance.

The PPG also organise an Exercise Support Group, an MS Support Group and are hoping to start an Arthritis Support Group and a Mental Health Support Group. They are all run by a different member of the PPG

As well as the PPG meetings we also have a virtual Patient Reference Group currently comprising sixty eight of our patients who are keen for the practice to contact them from time to time either by letter or email to ask them questions about our services, staff and facilities, etc.

Members of the PPG regularly attend meetings of LINK and other local patient groups

## **2. Description of the profile of the Patient Participation Group**

Our PPG comprises 10 members, who are patients at the surgery. They have also co-opted a student from Ilkley Grammar School onto the group to provide the views of the younger generation. A representative of the Parish Council also attends the meetings.

In view of the difficulties of making the group truly representative of the Practice Profile, the PPG decided to form a reference group to reflect more accurately, the views of the practice. This group has been formed for reference purposes and as a support to the PPG. It was not thought to be necessary for it to have a constitution or terms of reference. It was felt that formalisation of the group was likely to discourage participation of those patients whose views we most wanted to obtain i.e. those patients who were happy to provide feedback but did not want to be part of a formal organisation.

### **3. How the practice has worked to ensure that the Patient Reference Group is representative of our registered patients**

To ensure the group is representative of our practice population we have used various methods to recruit members to the group. For example:

- Advertised/promoted the group on our practice web site
- Advertised/promoted the group within the surgery on the PPG notice board
- Advertised/promoted the group in the Practice's Patient Newsletter. This explains about the group and advises people who to contact if they are interested in joining.
- The PPG have contacted local groups and organisations
- Provided information for interested patients
- GPs as part of their discussions during consultations may ask patients if they would be interested in joining the group
- Word of mouth from other members of the group

Each member of the PRG completed a profile form prior to being accepted into the group. We obtained a profile of our Patient list from the PCT for comparison purposes (Appendix 1) to ensure it is representative and members continue to be recruited onto the PRG to ensure representation improves (Appendix 2).

The Patient Reference Group now comprises 68 members, 30 Male and 38 female. Where certain sections of the practice population are not adequately represented, the PPG and the Practice are actively seeking to recruit at open meetings and surgery appointments.

### **4. Steps taken to determine and reach agreement on the issues which had priority and which should be included in the local practice survey**

The PPG met to identify and decide which issues they thought should be addressed as part of the local practice survey.

The process involved the PPG highlighting issues which had been raised by patients in discussion with them and at the open meetings. Various information sources were used including complaints, comments and the suggestions box in reception,

Once the issues had been identified they were then formed into questions and put into a format and layout which was user-friendly and not too onerous for patients to complete. The final version was piloted by one of the GPs and a couple of PPG members before it was issued.

### **5. How the practice sought to obtain the views of its registered patients**

The practice used a questionnaire based on the issues raised by the PPG, focusing on 18 questions. The PPG reviewed and revised the format, layout and how user-friendly the questionnaire was at a number of their meetings. The questionnaire was piloted with a couple of our PPG members.

Members of the PPG handed out the Profile Form and a copy of the Questionnaire to patients of the practice and the Practice Staff representative

handed them out in the practice reception. Specific clinics were targeted where appropriate

The PPG were actively involved throughout the whole process from identifying the issues/priorities, devising the questionnaire, handing out the questionnaire through to discussing the findings. A total of 68 questionnaires were completed and a report of the findings was compiled and presented to the PPG by the Practice Coordinators.

## **6. Steps taken by the practice to provide opportunity for the PPG to discuss the contents of the action plan**

The Practice Coordinators analysed the findings of the local practice survey and compiled a report. The findings for each question were summarised and illustrated either using charts or text.

The report was presented to the PPG for discussion at their meeting on the 6<sup>th</sup> February during which the findings were discussed in detail and a report produced.

On the 24<sup>th</sup> February, representatives of the PPG met with Drs. Jowett, Day and Rayment and Practice Coordinators Marilyn Hunt and John Hutchinson to discuss the results and form an action plan

## **7. Details of the findings that arose from the local Practice survey**

- Although Patients are satisfied/very satisfied with the information available, it is clear from some of the responses to other questions, that many are unaware of all of the services we offer eg early morning and evening appointments.
- Information is available in-house, on the website and in the Surgery Newsletter, but patients are not aware of all of these sources.
- Current methods need to be expanded and improved
- Patients are aware that some Doctors have specialties but not what they are
- Responses to Q4 indicated question not well phrased or fully understood. Consider including in next survey in more user friendly way
- Availability of appointments remains an issue
- Patients are not aware of the full extent of appointment options
- Access to the surgery with its two sets of doors is a problem for those with wheelchairs and push chairs
- The exit markers for the Building and directions to some doctors rooms causes some confusion
- Queuing to book-in and make appointments remains an issue particularly when a complicated query is being handled at reception

Overall, patients were very satisfied with the standard of service and quality of care provided by the practice and a significant number of favourable comments were made.

**8. 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 separate link in the Patient Survey Section of the website.

**9. Details of the action plan which the practice, and, if relevant, 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**

- Practice to investigate option of electronic notice board in waiting room to provide information
- Website to be promoted. Demonstration to be given at next open meeting
- Enquiries to be made to see if copies of our Practice Newsletter can be made available in the Chemist and Library
- Doctors specialties to be published on website, Practice Leaflet and newsletter
- Practice to undertake full review of its appointments, including telephone appointments to extend appointment day
- Booking appointments online to be investigated
- SMS texting of appointment reminders to be considered
- Availability of late evening and early morning appointments to be promoted on website and newsletter
- Telephone appointments to be promoted in newsletter and website
- Interim solution to use intercom at front door for those needing assistance to alert staff in building to assist
- Availability of this option to be signposted at Surgery entrance, on website and in newsletter
- Other more permanent options to be explored but may not be feasible in view of nature of the building
- Doctors to continue to collect patients from reception
- Booking appointments online to be investigated
- Assistance to Reception to be provided either through electronic arrival screen or additional staff assistance at peak times

**10. Issues and priorities taken on by the practice as a result of this report**

Please see separate link in the Patient Survey Section of the website.

**11.Practice Information (opening hours, obtaining access to services, extended hours, times when individual healthcare professionals are accessible to patients)**

Grange Park Surgery is open between the hours of 8.00am and 6pm Monday to Friday.

Patients may access services during these times by telephone or by calling into the practice. Routine telephone contact is not available between 12.30pm to 1.30pm although the surgery remains open. An emergency contact number is provided.

Our GP availability is show in the timetable below: (Please note that at times the timetable may be subject to change)

	Monday		Tuesday		Wednesday		Thursday		Friday	
	am	pm	am	pm	am	pm	am	pm	am	pm
Dr. R Goodwin-Jones	x	x	x				x	x		x
Dr. S Day	x	x	x	x	x	x			x	
Dr. L Jowett	x	x			x	x	x	x	x	x
Dr. C Rayment			x	x	x				x	
Dr. A Holt					x	x	x	x	x	x
Dr. S Hattam	x	x	x	x						
GP Registrar	x	x	x		x	x	x	Á	x	x

The practice provides extended opening hours on a Monday evening until 8pm and on a Friday morning from 7.30am. Unscheduled telephone contact is not available during the extended opening period but pre-booked telephone appointments can be made.

The healthcare professionals available on these sessions are GP Partners and a Practice Nurse.

## 12. Conclusion

This report seeks to outline the process that Grange Park Surgery has undertaken to obtain the views of a representative group of our patients on the standard of care and quality of service provided by the practice.

The survey process will be ongoing and suggestions for future questionnaires and volunteers for our patient groups will be most welcome.

We feel that this has been an extremely worthwhile exercise and has been very successful in achieving its aims and objectives.

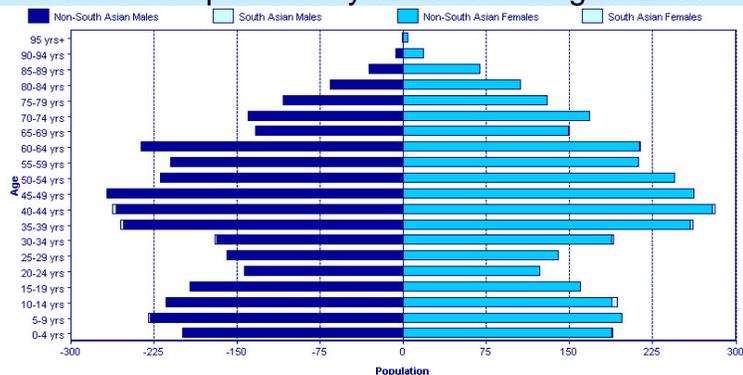
The Practice would like to thank the members of the Patient Participation Group and the Patient Reference Group for their hard work without which this report would not have been possible

A copy of this report will also be shared with PCT colleagues.

## Appendices

### Appendix 1 – Age/sex profile of Grange Park Surgery

Practice Population Pyramid as at August 2008



### Appendix 2 – Age/sex profile of Patient Reference Group

