

PATIENT REFERENCE GROUP REPORT

Our patients' views are important to the practice and whilst we do listen to what people say informally, we also like to take the opportunity to ask, in a more formal way, what you patients from time to time. Our patients span all age ranges and we want to do our best to hear what everyone has to say about the service we provide.

This report summarises the development and outcomes of Grosvenor and Gresty Brook Medical Centres patient reference group (PRG) in 2012/13.

It contains:

1. Profile of practice population and PRG
2. Process used to recruit to our PRG
3. Priorities for the survey and how they were agreed
4. Method and results of patient survey
5. Resulting action plan and how it was agreed
6. Progress made with the action plan
7. Confirmation of our opening times.

1 Profile of practice population and PRG

Practice population summary

Grosvenor and Gresty Brook Medical Centres have 13687 patients, 6860 male patients and 6827 female patients. The most common age range is 40-49. The ethnicity of our patients is mainly British.

PRG profile

We have three members on our patient group one male and two female. We have meetings as and when we need to, usually three a year but have regular email contact.

We have a virtual patient group of 30 members who we email information to and ask their views. We have 17 female and 13 male members. These members are kept up to date by receiving copies of minutes from Patient Panel meetings. These minutes are also put onto the practice website.

Although the virtual panel has increased in numbers it is disappointing that we have been unable to recruit further members to the panel that meets at the surgery. This has been discussed at the most recent meeting in Patient Panel March 2013, and the practice will continue to actively raise awareness of the group to encourage patients to fill in expressions of interest forms. Once these have been received our panel members have agreed to meet with any potential applicants to advise them of the work that is done by the group and the value of their potential contribution

Age

The age range of our group is 35 – 77:

1 patient 25 - 34

5 patients 35 – 44

5 patients 45 – 54

8 patients 55 – 64

10 patients 65 – 74

1 patient 75 - 84

The group also has no young people under 25 and it was agreed that during 2013 the practice would endeavour to see if young people could be encouraged to join and express their views.

Ethnicity

Mainly British

Regularly visit the practice

Regularly to occasionally

2 Process used to recruit to our PRG

To recruit to our PRG we:

- Have posters in the practice and on the Patient Panel Board (attached appendix i)
- Email patients who express an interest and keep them informed if they join the virtual group (attached appendix ii). Minutes of meetings held are always circulated to panel members who attend and to the virtual panel members
- Put information on the practice website that patients can access about the Patient Group and minutes of meetings so any patient visiting the website can read and understand the contribution of the panel at Patient Panel meetings (attached appendix iii)
- Staff speak with patients if they make an enquiry at the reception desk and advise how to express an interest

As noted above the practice is actively trying to recruit more members to attend the group that meets but the virtual group is provided with minutes from meetings held so are regularly kept up to date. The group has varied the times of the meetings in 2012 and 2013 to see if this encourages more people to attend. Ideally the practice would like to recruit some younger patients.

The practice will be holding a flu immunisation day in October 2013 and it was proposed that some Patient Panel members could be available to talk to patients about the work they do if they may be interested in joining the group.

3 Priorities for the survey and how they were agreed

To determine the priorities for the survey we:

- Contacted members via email as we already have PRG contact details stored from their initial expression of interest (see attached appendix iv)
- Put forward suggestions from patients who had attended the practice
- Emailed patients/PRG (see attached appendix v)

In November 2012 the patient panel meeting met with the practice to review the 2012 Action Plan and progress made along with various changes to the practice. Information was also provided on the work the South Cheshire Clinical Commissioning Group was undertaking which updated patient panel members on the current changes to the NHS. The minutes of this meeting were circulated to Patient Panel members and put onto the practice website.



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The November meeting did establish potential priorities for the next survey but it was agreed to hold a meeting in early 2013 to formalise the priorities giving the opportunity for further suggestions to be proposed from panel members.

4 Method and results of patient survey

The next meeting was held in January 2013 where the final priorities were agreed along with the actual survey questionnaire.



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Again these minutes were circulated to all panel members and put onto the Practice website.

Once the Practice had established the priorities the practice developed the questions using:

- Previous surveys for ideas
- New questions that were suggested
- Making changes to questions already used to tailor them for a more appropriate response

The Practice carried out the survey using:

- Internet-gp (our website company)
- Paper forms available in reception at both locations.

The survey was carried out from 4th February – 15th February 2013.

Survey results

In February 2013 the Practice carried out a Practice Survey asking patients for their views on practice issues. Patients were surveyed in 2012 on similar issues and the practice utilised some questions from the published NHS national patient survey.

The final survey that went out to patients is as below:



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panel\Practice Survey

211 questionnaires were completed by patients from Grosvenor Medical Centre, Gresty Brook Medical Centre and also on our website.

As can be seen from the survey patients were asked a variety of questions about access to our Surgeries and appointments with the doctors. Once the survey was finished the survey results were collated as below:



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Charts were used to compare the results from previous surveys.

Although the practice had experienced a number of challenges in 2012 with a partner retiring and changes to the computer system the results from this year's survey were disappointing compared to the previous year. The key areas of note along with the practices comments after discussion with the patient panel were:

- **More patients found it difficult to get through on the phone when calling before 9am.**

Answering the phone – the practice tries to ensure that as many members of staff are answering the phone as possible, particularly at the beginning of the day. Of course, some days are busier than others, and there is still administrative work to be done, but everyone concentrates on the phones first thing in the morning when it is busiest – often as many as 6 people are answering over the two sites.

Telephone queuing system – The practice has investigated using a queuing system that lets callers know where they are in the queue if the line is busy:

Advantages

- The caller knows that they have got through and that it is only a matter of time before they can talk to someone

Disadvantages

- You might know where you are in the queue, but not how long each caller will take or how many people are dealing with the calls, so you don't know how long you will be waiting
- You will pay for the call as soon as you are connected, even though you are queuing
- The call handling system will only accept a certain number of callers waiting – when it has reached capacity, you won't get an engaged tone, but you will hear a message saying that all lines are busy – please call back. You pay each time you hear the message.

We discussed this with the Patient Group and everyone felt that the disadvantages of this system outweighed the benefit at the moment

- **More patients have said they are unable to be seen on the same day with an urgent problem**

The urgent appointments are intended for use of when a patient believes that his or her medical problem means that they need to be seen on the same day. The practice tries to ensure that the practice see patients who feel that their problem is urgent, but may ask for some more information first: this is because the problem may be something that a Nurse could deal with. We cannot guarantee a choice of GP or time for urgent appointments.

With an urgent problem there is usually an emergency doctor on duty every day to sort our real emergencies. People differ as to what they regard as urgent. The practice may need to give consideration as to how patients can be advised to explain to the receptionist their circumstances for the urgent appointment as they may be able to help with suitable alternative pathways or offer a telephone consultation which may be suitable.

- **More patients are waiting over a week to see a doctor of their choice, last year patients could be seen after 3 days.**

The main reason why patients could not get an appt they wanted was because the doctor they wanted was unavailable. The practice has talked about this at some length and is not sure that there is anything we can do about it. The practice discussed the general availability of appointments and has engaged a regular locum GP to increase the number and choice of appointments available. The practice may look to making this a permanent arrangement.

The practice knows that patients may prefer to see one doctor or another, either because they get on well with a particular doctor, or because they want to maintain continuity, and we would always try to accommodate these preferences. However doctors do take time out of the surgery, or their appointments may already be booked, and it is in these circumstances that patients will be offered an alternative choice. The practice has 7 partners (5 male and 2 female) together with 3 salaried GPs (2 male and 1 female) and 1 locum doctor (female) and the entries made into your computerised medical record will be available for any doctor at the practice to read if they need to.

- **More patients are waiting over 3 days to see any doctor, last year most patients could be seen after 1 day.**

The practice is constantly keeping our provision of appointments under review to make sure that we are meeting overall demand and will continue to do so. It was noted that not many patients were signed up to the on-line booking of appointments and ordering of repeat prescription services and that the practice could publicise these facilities.

- **On average Patients had to wait longer to be called in by the doctor than last year**

See above.

On a positive note patients are still as happy with their consultation with the doctor. Indeed this had improved since last year. There are a number of important areas to patients within the consultation as outlined below that contribute to a successful consultation as below:

Listening carefully to the patient

How well the doctor has clarified the patient's problem is important as often doctors and patients don't agree what the presenting problem actually is, but where they achieve agreement, this significantly contributes to patient satisfaction. In order to clarify problems effectively the doctor needs to pick up on both verbal and non-verbal cues. The importance of listening to patient's opening statements allows doctors to focus on the issues mentioned by their patients and active listening by the doctor is important. Also when doctors provide information explaining tests and treatment patients will understand what they need to know and what is important.

Involving patients in decisions about their care

Patients vary considerably in how much they want to be involved in decisions. Some patients want the doctor to advise them what to do and others want to be fully informed about the options and come to their own decision. Our survey indicates that all the doctors explain problems well and deal with questions and worries so that patients can make the right decision.

Treating the patients with care

It is important to ensure the consultation with the patient allows the doctor to demonstrate their concern and ensuring that the patient understands what they have said. Giving patients the opportunity to ask questions is important along with giving advice and information. Patients are often anxious about their problem and may often already have hopes and expectations concerning their care. Our survey indicates that the doctors have been patients have been satisfied with their consultation and how they have been treated.

5 Resulting action plan and how it was agreed

To develop the action plan, the practice discussed with the Patient Panel on Monday 4th March 2013 to get comments from the PRG for and action plan to be drafted and agreed.

The agreed action plan is attached (appendix vi). The main actions were:

- Publicise our questionnaire results online
- Publicise our questionnaire results in our surgeries
- Try to encourage patients to use the booking in screen
- Increase Doctors to provide more appointments
- Add Internet appointments for patients to book online via our website

Areas where we could not achieve what the PRG wanted were:

- N/A

There were significant changes to our services in these areas:

- N/A

These were agreed with the PCT on N/A.

6 Progress made with the action plan

A summary of the progress as of 20 March 2013 is:

You said...	We did...	The result is...
Publicise our questionnaire results online	Type up report and upload to our website	Complete
Publicise our questionnaire results in our surgeries	Poster for waiting room to inform patients of results	Complete
Try to encourage patients to use the booking in screen	Poster as you walk into the waiting room	Complete
Increase Doctors to provide more appointments	More doctors have recently been employed, publicise to patients	Complete
Help patients get through on the telephone	Change appointment system so patients don't have to call at 8.30 for an appointment	On-going
Advise patients there sometimes be a wait be seen by doctor if they have had problems in clinic	Poster for waiting room	Complete
Add Internet appointments for patients to book online via our website	Online appointment will be available in April, Rachel to update website	Available from April 2013
Patient group said they would like Saturday surgeries again	Partners to discuss at practice meeting	On-going
Email Patients to introduce them to the group	Construct an email to patients	On-going
Advise patients of our rate of patients not turning up for appointments	Poster for waiting room	Complete

7 Confirmation of our opening times

As a result of the survey we have not changed out opening times. They are:

Grosvenor Medical Centre

Gresty Brook Medical Centre

Monday to Friday 8am– 6.30pm

Monday to Thursday 8am – 6pm
Friday 8am - 5pm

You can call the surgery Monday to Friday 8.30 – 6 pm
The surgery reception is open 8am – 6pm.
Surgery times are 8.45am – 10.45 and 3.30pm – 5.50pm
Outside of these times please call 01270 273666



Your Practice needs **YOU** to join the “Patient Participation Group”

Objectives of the PPG

- ✓ Influence NHS Services and Practice policy
- ✓ Represent the Practice population
- ✓ Promote patient needs
- ✓ Liaise with doctors, patients, and staff
- ✓ Feedback to the community
- ✓ Suggest facility improvements



The PPG needs more volunteer members to obtain new ideas
The PPG meets 4 or 5 times per year at convenient times
Please contact Rachel Lloyd at the Practice to express your interest

Appendix ii

Page 1 of 1

Lloyd Rachel (CENTRAL AND EASTERN CHESHIRE PCT)

From: Lloyd Rachel (CENTRAL AND EASTERN CHESHIRE PCT)

Sent: 25 January 2013 08:52

Subject: Minutes from Patient Group Meeting

Attachments: Patient Group Meeting 15 1 13.rtf

Dear Patients

Please find enclosed the minutes from our patient group meeting on 15th January.

We are running a survey 04/02/2013- 15/02/2013. Like last year the survey will be available to complete online. I will email you the link on the 4th February.

Our next meeting is Monday 4th March at 6.15pm. We will be going through the results of the survey. If you would like to attend please let me know.

Kind Regards

Rachel Lloyd

Grosvenor Medical Centre
Grosvenor Street
Crewe
Cheshire
CW1 3HB

Tel. 01270 256340

08/02/2013

Patient Group

Appendix iii

Patient Group

Patient Participation Report

Please click on the link below for our full Patient Participation Report

[Local Patient Participation Report >](#)

Sign up to our Patient Participation Group

[Sign up for our Patient Group >>](#)

History Of Our Patient Group

Setting up the patient panel

We advertised the post for patient group members in the local newspaper in September 2005, we had four replies and we invited these patients for an group meeting in October 2005. In the meeting had informal chat about the role of the patient group and we also showed the patients around the practice where they got to meet our staff and got an insight to the work the practice carries out.

Activities of the patient panel

In March 2006 the group got their own notice board in our reception area with information about the members, what there role is and how to contact them. They also chose information about local services and practice information to advertise.

We produced a patient group newsletter in May 2006, which also included information about the members in a bit more detail, there aims as patient representatives, surgery opening times and contact information and useful telephone numbers. This was followed up in March 2007 with the results of the patient survey about additional opening hours.

After the advertising from notice board and newsletter we had interest from another two patients who joined our group, but unfortunately one member had to leave due to work commitments, but we did have another patient join shortly after.

In our meetings we have discussed:

- The new build at Gresty Brook
- The Contents of our Practice Brochure
- The launch of our Website
- The Production of a Patient Participation Group Newsletter
- Information to go in waiting room
- National Change – White Paper
- Setting up an email account for the practice to contact patients
- Availability of Doctors appointments, the balance between same day and advanced appointments

The group have also been involved in our Patient Surveys about the practice opening times and the national patient questionnaire. We discussed issues that arose from the results of these to try and better our service.

Attempts to widen representation

We have also set up an email account on separate database for us to store patient emails and send out information about the practice. We collected 17 patient email addresses and sent the first lot of information out to patients in October 2011. The email included details on the appointment system change, information about our Patient Group as well as how to join and we asked if anyone would like to help us by giving their views on the practice. With the responses we hope to gain extra members of the Patient Group and have patients we can approach to ask

Appendix iv

Patient Opinions

I would like the practice to hold my name and contact details to ask me how I would like services inside and outside the practice to develop

Please Tick

I would like to join / be informed about the patient group

I would like to help decide what to ask other patients about

I would like to be asked about practice and local services

Name	_____
Address	_____ _____ _____
Date of Birth	_____
Email Address	_____

I understand that the practice will hold this information in a separate register for the purpose of asking about the service it provides and with others commissions from other health care providers

Signed _____

appendix v

Lloyd Rachel (CENTRAL AND EASTERN CHESHIRE PCT)

From: Lloyd Rachel (CENTRAL AND EASTERN CHESHIRE PCT)
Sent: 02 January 2013 13:19
Subject: Minutes from Patient Group Meeting
Attachments: PPG 20 November 2012.doc

Dear Patients,

Please find enclosed the minutes from our patient group meeting in November. Please let us know your thoughts and if you have any questions you would like to put forward for the survey prior to the next meeting.

Our next meeting has been arranged for 15th January 2013

Kind Regards

Rachel Lloyd

Grosvenor Medical Centre
Grosvenor Street
Crewe
Cheshire
CW1 3HB

Tel. 01270 256340

Appendix vi

Grosvenor Medical Centre **Patient Participation Survey Action Plan 05th March 2013**

Objective	Actions	Responsibility	Timescale	Resources/Funding	Progress
Publicise our questionnaire results online	Type up report and upload to our website	Rachel	2 weeks	I will use the data from the questionnaire to type up a report	Complete
Publicise our questionnaire results in our surgeries	Poster for waiting room to inform patients of results	Rachel	6 weeks	I will use the data from the questionnaire to produce a poster	Complete
Try to encourage patients to use the booking in screen	Poster as you walk into the waiting room	Rachel	1 week	Poster	Complete
Increase Doctors to provide more appointments	More doctors have recently been employed, publicise to patients	Dr Spooner and Caroline Harley	Already complete	Practice funding.	Complete Review in six months time to see if additional capacity is making a difference
Help patients get through on the telephone	Change appointment system so patients don't have to call at 8.30 for an appointment	Dr Spooner	6 months	N/A	On- going. To continue to review the balance of bookable on the day and in advance appointments and adjust surgery templates accordingly

Advise patients there sometimes be a wait be seen by doctor if they have had problems in clinic	Poster for waiting room	Rachel	1 week	N/A	Complete
Add Internet appointments for patients to book online via our website	Online appointment will be available in April, Rachel to update website	Rachel	1 month	N/A	Rachel will add to website in April
Patient group said they would like Saturday surgeries again	Partners to discuss at practice meeting	Partners	6 months	N/A	On- going
Email Patients to introduce them to the group	Construct an email to patients	Patient Group	3 months	N/A	On- going.
Advise patients of our rate of patients not turning up for appointments	Poster for waiting room	Rachel	1 week	N/A	Complete