

EAST BARNWELL HEALTH CENTRE PATIENT PARTICIPATION REPORT 2013/14



Guidance notes

This report must be published on the Practice website and a copy submitted to england.ea-des-activity@nhs.net by no later than 31st March 2014.

(This report should be used as a standard report template. It is annotated throughout to ensure the required information is documented appropriately. These guidance notes will be in grey and should be removed from the version uploaded onto your website to make the report easier for patients to read)

1. Maintaining the Patient Reference Group (PRG)

A summary of the process in place to annually review the practice profile to ensure the group is as representative as possible and, if not, the continuing recruitment process used to demonstrate every effort has been made to engage with any unrepresented groups.

2. Method and Process for Agreeing Priorities for a Local Practice Survey

The method the Practice adopted to seek the views of the PRG in determining the priority areas for the Practice to look at to include in a local annual practice survey.

3. Details and Results of the Local Practice Survey

A description of the local practice survey, how it was carried out, as well as details of the survey results.

4. Discussing Survey Results with the Patient Reference Group (PRG)

Details of how the Practice consulted with the Patient Reference Group (PRG) on the survey findings

5. Agreeing an Action Plan with the Patient Reference Group (PRG)

Details of the agreed action plan setting out the proposals arising out of the local practice survey results and how they can be implemented. Details of any issues that arose in the survey that cannot be addressed in the action plan and the reasons why.

6. Publishing the Local Patient Participation Report on the practice website by the 31.03.14

Details of where this Report has been published and also details of the Practices opening hours and how patients can access services.

7. Practice Declaration

Confirmation that the Local Patient Participation Report is a true and accurate representation of the work undertaken to fulfil the requirements of the Patient Participation DES 2013/14

1. Our Patient Participation Group

1.1 If this is the first year of your PRG, has a constituted structure been developed to reflect the practice population and to obtain feedback? How were representatives sought and what work was carried out to engage with any underrepresented groups?

1.2 If this is not your PRG's first year, is the PRG still representative of the practice population? If there are underrepresented groups, how does the practice try to engage with them?

We have about 80 patients in our group but have found it difficult to engage the teenage population. We encourage patients to engage by advertising the PPG in the practice and on the website and also by talking to patients in the practice when the opportunity arises.

We have a wide mix of ethnic background, retired patients, employed and unemployed. We have a mixture of patients with long term conditions, mental health issues and chronic conditions. We have both rural and city demographics.

We liaise with community organisations such as Abbey People – informing them of meetings so that we can try and reach people who may not come into the surgery.

Guidance Notes: Practices must strive to engage and encourage feedback from patients that extend beyond a mix of just age/sex and ethnic origin. These could include patients from marginalised or vulnerable groups such as elderly patients, patients with a learning disability or other disability and those with various social factors such as working patterns, employment status and carers etc.

Component 2. Method and Process for Agreeing Priorities for the Local Practice Survey

Guidance notes: Agree areas of priority with the Patient Reference Group (PRG)

Component 2

As part of component 2 of the DES Practices are required to agree which issues are a priority and include these in a local Practice Survey.

The PRG and the Practice will shape the areas covered by the local practice survey. The areas covered in the local practice survey will, therefore, need to be agreed jointly based on key inputs and including the identification of:

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- Patients priorities and issues
- Practice priorities and issues including themes from complaints
- Planned Practice changes

- Care Quality Commission (CQC) related issues
- National GP and/or Local Patient Survey issues

2.1 How were the views of the PRG sought to identify the priority areas for the survey questions i.e a meeting, via email, website etc?

An email was sent to the virtual group regarding the survey. The PRG met on the 26th September and discussed the survey content. It was agreed that all questions asked in the GPAQ survey were relevant and decided to go with it again this year. Appointment access, getting through on the phone and patients seeing own doctor were also included in the questions on the survey and these are priority areas. We asked for feedback regarding physical impairment and repeat prescription issues.

2.2 How have the priorities identified been included in the survey?

Appointment access, getting through on the phone and patients seeing own doctor are included in the questions on the survey.

Step 3. Details and Results of the Local Practice Survey

Guidance Notes: Collate patient views through the use of a survey

Component 3

As part of component 3 of the DES Practices are required to collate patients views through a local practice survey and inform the Patient Reference Group (PRG) of the findings.

The Practice must undertake a local Practice survey at least once per year. The number of questions asked in the local practice survey will be a matter for the Practice and the PRG to agree. Questions should be based on the priorities identified by the PRG and the Practice.

3.1 Was a survey carried out between 01.04.13 and 31.03.14?

Yes – we ran the survey from October 13 to mid-January 14

3.2 What method(s) were used to enable patients to take part in the survey (i.e survey monkey, paper survey, email, website link) and why?

We used a paper survey and also had a link on the practice website.

3.3 Was the survey credible (was the response rate sufficient to provide ‘the reasonable person’ with confidence that the reported outcomes are valid)?

Yes – we had 271 questionnaires returned although not every question was answered on the survey.

On average 224 patients answered every question (these figures did not include the multiple tick questions)

3.4 Please provide a copy of the survey and the analysis of the results of the survey.

Please note these reports have been added separately to the patient group page on the practice webpage.

www.eastbarnwellhealthcentre.co.uk

Component 4. Discussing Survey Results with the Patient Reference Group (PRG)

Guidance notes: Provide the Patient Reference Group (PRG) with the opportunity to discuss survey findings and reach agreement with the PRG of changes to services.

Component 4

As part of component 4 of the DES Practices are required to provide the Patient Reference Group (PRG) with the opportunity to comment and discuss findings of the local practice survey and reach agreement with the PRG of changes in provision and manner of delivery of services. Where the PRG does not agree significant changes, agree these with the PRG.

4.1 How were the survey results discussed with the PRG and any proposed outcomes agreed?

The survey results were emailed to the virtual PRG giving non attending members the opportunity to forward any comments which could be included at the meeting. The PPG meeting was held on the 12th February 2014. The survey results were discussed with the group, one of the partners was present as was the Practice Manager - the action plan was agreed at this meeting.

Component 5. Agreeing an Action Plan with the Patient Reference Group (PRG)

Guidance Notes: Agree an action plan with the Patient Reference Group (PRG) and seek PRG/AT agreement to implement changes.

Component 5

As part of component 5 of the DES the practice is required to agree with the PRG an action plan setting out the priorities and proposals arising out of the local patient survey. They are also required to seek agreement from the PRG to implement any changes and where necessary inform the PCT.

5.1 What action plan was agreed and how does this relate to the survey results?

Getting through on the phone – we had a lower percentage than last year so it was agreed that this needs to be looked at again.

Appointments – pre booking – the team are going to undertake a review of the system

Seeing the same GP – agreed that this is a difficult one but will be discussed nonetheless in the practice meeting.

5.2 How was the PRG consulted to agree the action plan and any changes?

The virtual group were emailed on the 5th February to ask if anyone had any points regarding the survey that they would like raised at the next meeting. The action plan was discussed and agreed with the PRG at the meeting on the 12th February 14.

5.3 If there are any elements that were raised through the Survey that have not been agreed as part of the action plan what was the reason for this?

‘What opening times would make it easier for you to see or speak to someone?’ It was a mixed response with 29% and 21% wanting weekend and evening opening hours, however, 147 patients answered this question. The previous question on the survey is ‘Is your GP open at convenient times for you?’ 85% of the 247 patients said yes to this question. We discussed the Challenge Fund initiative with the group and are waiting to see the results of this pilot.

5.4 Are any contractual changes being considered? If so please give details and confirmation that these have been discussed with the AT.

N/A

Step 6. Publishing the Local Patient Participation Report

Guidance Notes: Publicise actions taken and subsequent achievement

Component 6

As part of component 6 of the DES the practices is required to publicise this Local Patient Participation Report on the Practice website and update the report on subsequent achievement *by no later than 31/03/2014*. A copy must also be sent to the AT by then.

6.1 Are there any further actions that have occurred from the:

2011/12 Action Plan None that I am aware of. New PM in post from September 13.

2012/13 Action Plan

~~Telephone access comparison – We have ensured we have enough staff to cover the peak times in the practice but unfortunately patients report they still find it difficult to get through. We have put this on the action plan again to see if any further improvements can be made.~~

In addition the Practice is required to provide details of Practice opening hours and how Patients can access services through core hours

6.3 What are the practices opening hours and how can patients access services during core hours (8am-6.30pm)

08:00 – 18:30. We close from 1pm – 2pm Mon, Tues, Thurs and Friday and 12:45 – 2pm on a Wednesday. We have an emergency phone line for any patients who may need medical help during the lunch time period. Patients can access services via telephone or in person.

Where a Practice is commissioned to provide Extended Hours the Practice is required to confirm the times at which patients can see individual health care professionals

6.4 Do you provide extended hours? If so, what are the timings and details of access to Health care Professionals during this period. **No**

7. Practice Declaration – *this is only required as part of the report submitted to the AT*

The Practice confirms that the above report is a true and accurate reflection of the work undertaken as part of the Participation DES 2013/14 .

Signed and submitted to the PCT and published on the Practice website on behalf of the Practice by:

Name: Mrs D Parsons

Signed:

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Surgery code: D81086.....

Date: 27/02/2014

Website: www.eastbarnwellhealthcentre.co.uk

FOR AT USE ONLY

Date Report Received by the AT: _____ Receipt Acknowledged by: _____

Report published and evidenced on Practice website by required deadline: _____