

Patient Participation Report - Oakwood Surgery

We are pleased to publish this report to show the real progress we have made during the year end to 31 March 2012. In this report we will show:

- How our Patient Reference Group (PRG) and the Surgery work closely together for the benefit of patients.
- How our PRG has developed over the past 12 months
- Results of our Patient Surveys and how they are likely to influence the growth of our patient-focussed services.

Stage One

1						
Practice Population:		14,389				
		Sex:	Male	7,105	Female	7,284
Age:	Under 16's					
	17 - 25	1,587	36 - 45	1,865	56 - 65	1,951
	26 - 35	1,673	46 - 55	2,158	66 +	2,703
Ethnicity:	Caribbean		other:			
British, Mixed British	African		other:			
English	Mixed Black		other:			
Scottish	Chinese		other:			
Welsh	Japanese		other:			
Indian, British Indian	other:		other:			

Are there any specific Minority Groups within the Practice Population?

To be the best of our knowledge - no.

The Surgery does not routinely record ethnicity information for our patients, but anecdotally, the majority of patients are British/Mixed British.

Validating that the patient group is representative of the practices population base. Payment Component 1

2						
Patient Representative Group Profile (PRG):						
		Sex:	Male	9	Female	5
Age:	Under 16's					
	17 - 25		1	56 - 65	6	
	26 - 35		4	66 +	3	
Ethnicity:	Caribbean		other:			
British, Mixed British	African		other:			
English	Mixed Black		other:			
Scottish	Chinese		other:			
Welsh	Japanese		other:			
Indian, British Indian	other:		other:			

What steps has the practice taken to recruit patients and to sure it is representative of the practice profile?

We include the PRG and provide contact information in the following:

- Practice brochure
- Our website
- Notice boards in the Surgery .
- In addition to the above, we recruit by:
- Word of mouth.
- Articles in our local free newspaper.

To improve access and thus support our quest for a broad spread of members, we are considering varying our meeting days and times and continue to adopt an open and welcoming attitude to prospective members.

Validating that the patient group is representative of the practices population base. Payment Component 1

3

Compare the PRG with your practice profile and describe the differences between the practice population and membership of the PRG?

Currently, the PRG has 14 members, comprising 9 patient-members, 3 GPs and the Asst Practice Manager (acts as Secretary and Manager for the Group.). Additionally, a non-member GP (on a rotation basis) to allow the group and patients to have access to all our GPs in turn.

The Practice Population is broadly 50% male/female - the PRG Patient - Members are 60% male at present: we are likely to have a new female member shortly. We are keen to have members who will make a contribution, irrespective of, age, sex or ethnicity.

- There are 9 GPs at the Surgery, 2 of which are female. We have 3 GP PRG members (1 of which is one of our female GPs).
- Our PRG reflects the patient profile for ages 36+: we are looking to recruit wider age range of PRG members and this work is on-going.

Validating that the patient group is representative of the practices population base. Payment Component 1

Patient Participation Report - Oakwood Surgery

Stage One continued

4

Please explain any differences in section 3 above and the efforts of the practice to communicate with groups not represented? (this

To improve access and thus support our quest for a broad spread of members, we are considering:

- Varying our meeting days and times and increase continue to adopt an open and welcoming attitude to prospective members.
- Having an open event to attract a broad spectrum of members.

Our recent Patient Survey included a some key information about the Surgery to inform patients - this survey was available to the patient population at large.

Validating that the patient group is representative of the practices population base. **Payment Component 1**

Stage Two

Agreeing Priorities

5

How has the practice sought the PRGs views of priority areas?

In addition to PRG meetings, we have:

- Elected a non-GP Chair for the PRG, who works closely and regularly with the Asst. Practice Manager in particular and the Surgery in general.
- Reviewed and revised the PRG's Terms of Reference to support the status and profile of the PRG.
- Established a communication channel via the Asst. Practice Manager to all PRG members (irrespective of whether members have access to the internet/e-mail) to allow regular and timely updates of what is happening within the Surgery and points/issues as they arise.
- For example:
 - In conjunction with the PRG, a brief pilot patient survey was compiled and implemented in June 2011. The results of this pilot survey drove the questions for the fuller January Patient Survey.
 - The questions in our Patient Surgery in January 2012 were drafted by the PRG.
 - The Surgery sought PRG's views on whether access to patient's records (say by the Community Nursing Service), should be available by implied consent (Patients need to opt out if they do not want their record shared) or by individuals providing written consent if they wish their record to be shared.

Validate through the local patient participation report. **Payment Component 2**

6

Please describe how the priorities for the survey were selected - do these reflect those set out by the PRG?

• As shown above:

- In conjunction with the PRG, a brief pilot patient survey was compiled and implemented in June 2011. The results of this drove some of the questions for the fuller January Patient Survey.
- The questions in our Patient Surgery in January 2012 were drafted by the PRG.

Validate through the local patient participation report. **Payment Component 2**

Stage Three

Survey

7

How has the practice determined the questions used in the survey?

The questions in our Patient Surgery in January 2012 were drafted by the PRG following the results of the pilot survey in June 2011.

Validate the survey through the local patient participation report. **Payment Component 3**

8

How have the priority areas been reflected in the questions?

Questions within the Patient Survey addressed the following priority areas:

- Number and availability of appointments
- Contacting the Surgery
- Interaction with Clinicians during consultations.

Please attach a copy of the questionnaire (Please see Appendix A)

Validate the survey through the local patient participation report. **Payment Component 3**

Patient Participation Report

Stage Three continued

9

Describe the Surgery - How and when was the survey Conducted?

The Surgery is based in the Mansfield Woodhouse Health Centre with consulting and waiting rooms on 2 floors (lift available) and below we describe the process we employed for the Patient Survey:

- The survey took place during the week commencing 9 January 2012 (5 days and at all times the Surgery was open).
- The then upcoming survey had been publicised in advance on the TV screens and notice boards in the Surgery.
- Survey forms were handed out by receptionists and clinicians: in addition:
- Survey forms were available in the waiting rooms
- During the week, non-GP members of the PRG were available to hand out survey forms and to assist patients, if required.
- Survey forms were available on our website also.

Validate the survey through the local patient participation report. **Payment Component 3**

10

What methods practice has used to enable patients to take part?

As shown above:

- The then upcoming survey had been included in advance on the TV screens and notice boards in the Surgery.
- Survey forms were handed out by receptionists and clinicians. In addition:
- Survey forms were available in the waiting rooms
- During the week, non-GP members of the PRG were available to hand out survey forms and assist patients, if required.
- Survey forms were available on our website also.

Validate the survey through the local patient participation report. **Payment Component 3**

Survey

11

How has the practice collated the results?

It was important that we could not identify patients completing Patient Survey Forms and so:

- We did not ask patients to put their names on the survey questionnaires.
- We did not ask patients to show which clinician they were to see nor at what time.
- A letter box was provided in the Surgery for completed forms.
- Periodically throughout the week, completed forms were extracted from the letter box and allocated a reference number.
- There was no link between the reference numbers and patients - thus ensuring anonymity.
- Completed forms were collated via a Microsoft XL spread sheet.
- Total responses were then moved into a results document - please see Appendix B

Validate the survey through the local patient participation report. **Payment Component 3**

12

How were the findings fed back to the PRG?

Building on the Surgery's strong relationship with the PRG:

- A report was compiled incorporating the information in Appendix B, together with a commentary.
- The report was submitted and reviewed at a Partner's meeting
- At the same time, the report was circulated to PRG members ahead of the then next meeting
- At the next PRG meeting the report and results were considered in detail.

Validate the survey through the local patient participation report. **Payment Component 3**

Stage Four

Results

13

Please describe survey results:

155 survey forms were returned and results recorded.

The results were very good - here are the key points:

- In each area, 87% or more of respondents rated Oakwood Surgery as Acceptable or Better
- In response to the question "How did you find your consultation with your clinician today" 100% of respondents rated Oakwood Surgery Acceptable or Better
- In response to the question "Overall, how do you rate the service you receive from Oakwood Surgery?" 95.3% of patients responding to the survey rated the Surgery as Acceptable or Very Good.

Validate the survey and findings through the local patient participation report. **Payment Component 4**

Patient Participation Report

Stage Four continued

14

Explain how the PRG was given opportunity to comment?

At the same as our report was being reviewed by the Surgery partners, the report was distributed to PRG members ahead of the then next PRG meeting:

- Discussion was included on the agenda for the next meeting of the PRG (February 2012)
- At the PRG meeting on 6 February 2012, the report and the results were discussed.

Validate the survey and findings through the local patient participation report. **Payment Component 4**

15

What agreement was reached with the PRG of changes in provision of how service is delivered?

As we had been pro-active in that we undertook the pilot survey in June 2011, this had brought to the attention of the Surgery and the PRG the issues which had been raised by patients:

- Therefore the January Patient Survey drawn up by the PRG enabled both the Surgery and PTRG to focus on progress towards addressing the points raised in the earlier survey.
- Additionally, at the PRG meeting in December 2011, PRG members were advised that the Surgery was reviewing the dynamics of the appointment set up.
- At the PRG meeting in February 2012, results of the review of the appointments system were rolled out and have since been implemented.

Validate the survey and findings through the local patient participation report. **Payment Component 4**

16

Were there any significant changes not agreed by the PRG that need agreement with the PCT?

None

Validate the survey and findings through the local patient participation report. **Payment Component 4**

Results

17

Are there any Contractual considerations that should be discussed with the PCT?

None

Validate the survey and findings through the local patient participation report. **Payment Component 4**

Stage Five

Action Plan

18

How did you consult with the PRG about the action plan?

We discussed at our meeting of the PRG on 6th February 2012 and an Action Plan was drawn up to accompany this report on our website.

Consulting on the Action plan with the PRG and seeking PCT agreement where necessary. **Payment Component 5**

19

Please give a brief summary of priorities and proposals agreed with the PRG arising out of the practice survey:

Whilst the results of the Patient Survey carried out in January 2012 were good, it was felt that we ought to continue to be vigilant to maintain (and improve where possible) standards and patient-focussed services:

- Appointment availability had been addressed by the recent review, which has been implemented since the patient survey was undertaken.
- Both the PRG and the Surgery would like to improve our telephone service to our patients.

Please include a copy of the action plan (Including how proposals will be implemented)

A copy of our Action Plan is to be added to our website.

Consulting on the Action plan with the PRG and seeking PCT agreement where necessary. **Payment Component 5**

Patient Participation Report

Stage Five continued

20

Were there any issues that could not be addressed? - if so please explain

Cost of telephone calls to the Surgery (08444 number) and patients being held in a caller queue, before the call being answered:

- The Surgery's contract with its call provider is due for review in 2013: currently, the Surgery rosters higher levels of staff to answer telephones at peak times. .
- Ahead of the review of the telephone contract, it is anticipated that PRG's views will be sought as to patient-preference re maintaining the current call configuration (08444 no with call queuing) or revert to a landline no (in which case patients would not be able to queue, but if all lines to the Surgery were busy calls would hear the engaged tone and need to re-dial).

Consulting on the Action plan with the PRG and seeking PCT agreement where necessary. Payment Component 5

Has the PRG agree implementation of changes and has the PCT been informed (where necessary)

As will be seen above, the Surgery has responded to patient concerns about appointment availability with the support and agreement of the PRG.

Consulting on the Action plan with the PRG and seeking PCT agreement where necessary. Payment Component 5

Stage Six

Publication of Report

22

Please describe how this report has been publicised/circulated to your patients and the PRG

- For circulation to PRG - please see response to Qs 14 & 15.
- Results added to the Surgery website
- Results added to the Surgery notice boards
- Results added to the surgery TVs

Date Posted on Website: 22 March 2012

Additional statement to support report publication. Payment component 6

23

Additional Information

Opening Times

Confirm Practice opening hours - explain how patients can access services during core hours?

Patients may access our services during the following hours:

The Surgery is open from 8.00am to 6.30pm each weekday for core services. Patients are requested to contact us between 8:30am and 6pm to book an appointment, apart from Wednesday - 8.30am to 5.30pm. We offer an emergency option on our telephones to contact us in for emergencies from 8:am and 6:30pm - outside of these times, emergency calls are re-directed to our Out of Hours Service. Currently, although we do not open between 12:45pm and 1:45pm, the Surgery may be contacted in an emergency by telephone (Option) 1 or by ringing the emergency bell in the Surgery.

- Patients may contact us by telephone, calling at the Surgery, e-mail or via post.
- We offer a range of a range of routine appointments to see a Doctor - Monday, Tuesday and Thursday from 8.30am to 7.00pm, on Friday from 8.30am to 6.30pm and Wednesday 8.30am to 12 noon. Additionally, telephone consultations are available for patients who prefer to just speak with a doctor rather than be seen.
- Appointments to see our Nurses and Health Care Assistants (HCAs) are available for 8.30am to 7pm for each weekday, apart from Wednesday appointments are available until 12 noon.
- For urgent appointments, patients are requested to contact the Surgery at 8.30am. Urgent problems are seen as soon as possible on the same day, usually by our Duty Doctor.
- We offer a text appointment confirmation and reminder service.
- We treat everyone on an individual basis, irrespective of their ethnic origin or religious or cultural beliefs, gender or age.

Additionally, there are a number of health services, which the Surgery does not manage, available within the Health centre.

Additional statement to support report publication. Payment component 6

24

Where the practice offers extended opening hours please confirm the times that patients can see individual health care professionals?

Please see our response to question 23, which shows the times for which appointments may be made for our clinicians, including those in extended opening hours.

Additional statement to support report publication. Payment component 6


Number of PRG meetings which have taken place since 1st April 2011	5
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Oakwood Surgery - Patient Participation report - 2011/2012

Office Use:	Section attained in							
DES Component	1	2	3	4	5	6	7	8
One								
Two								
Three								
Four								
Five								
Six								

Oakwood Surgery - Patient Participation report - 2011/2012

Appendix A - Patient Survey

OAKWOOD SURGERY			
2012 PATIENT QUESTIONNAIRE			
<p>Oakwood Surgery is presently responsible for the health care of over 14,500 patients in our area. We aim to make each individual's experience here as comfortable as possible and would therefore appreciate you taking a few moments to complete this questionnaire in order to raise awareness of what we are and are not doing well.</p>			
Date:		Time:	
I am here to see a			
Doctor?	<input type="checkbox"/>	Nurse?	<input type="checkbox"/>
Health Care Asst?	<input type="checkbox"/>	Other?	<input type="checkbox"/>
FACT: Each week Oakwood Surgery offers the following GP appointments- approximately 550 to Book on the Day, 250 prebookable up to a month ahead and 250 telephone appointments. We also offer a weekly average of the 650 10 minute Nurse appointments and 330 10 minute Health Care Assistant appointments			
How easy did you find it to book your appointment today?			
Very Easy	<input type="checkbox"/>	Acceptable	<input type="checkbox"/>
Difficult	<input type="checkbox"/>	Unacceptable	<input type="checkbox"/>
Comments for improvement?			
FACT: Oakwood Surgery employs 12 receptionists/medical secretaries between 8am and 7pm most days. Receptionists have many roles such as making/cancelling and amending appointments on the phone and at front desk; checking patients in; filing results from tests into patient notes; labels for blood forms; scanning hospital letters into notes; booking hospital appointments; writing letters at the GP request; issuing prescriptions; recalling patients for tests; and many many more. However, although they work under pressure Oakwood Surgery wants you to receive a pleasant and professional greeting at all times.			
How did you rate the receptionists greeting to you today?			
Very Good	<input type="checkbox"/>	Acceptable	<input type="checkbox"/>
Basic	<input type="checkbox"/>	Unacceptable	<input type="checkbox"/>
Comments for improvement?			
FACT: Oakwood Surgery has recently invested in the "LIFE CHANNEL" in order to make your wait more comfortable. We also offer an information screen showing health advice and a patient calling system; along with information posters and leaflets around the waiting rooms.			
How comfortable do you find the waiting areas within the practice?			
Very Good	<input type="checkbox"/>	Acceptable	<input type="checkbox"/>
Basic	<input type="checkbox"/>	Unacceptable	<input type="checkbox"/>
Comments for improvement?			
FACT: GP appointments are for 10 minutes and Nurse appointments are for between 5 and 40 minutes depending on medical requirements. While we attempt to ensure you are not kept waiting for your appointment we treat each patient as an individual and this can at times mean a patient's specific needs can cause the GP or Nurse to over run.			
Did you find the waiting time for your appointment today to be..?			
Very Good	<input type="checkbox"/>	Acceptable	<input type="checkbox"/>
Too long	<input type="checkbox"/>	Unacceptable	<input type="checkbox"/>
Comments for improvement?			

Oakwood Surgery - Patient Participation report - 2011/2012

FACT:	Oakwood Surgery has 9 doctors, 4 Nurses, and 2 Health Care Assistants. We pride ourselves on having clinicians that are not only highly skilled but also friendly and approachable.			
How did you find your consultation with your clinician today?				
	Very Good <input type="checkbox"/>	Acceptable <input type="checkbox"/>	Basic <input type="checkbox"/>	Unacceptable <input type="checkbox"/>
Comments for improvement?				
FACT:	Your answers and comments will be used by the Patient Reference Group in order to produce a list of suggestions for improvements to the practice.			
Overall, how do you rate the service you receive from Oakwood Surgery?				
	Very Good <input type="checkbox"/>	Acceptable <input type="checkbox"/>	Basic <input type="checkbox"/>	Unacceptable <input type="checkbox"/>
Comments for improvement?				
<i>Thank you for taking the time to complete this questionnaire.</i>				

Oakwood Surgery - Patient Participation report - 2011/2012

Appendix B - Patient Survey Results

I am here to see a								
	Doctor?	53.13%	Nurse?	41.88%	Health Care Asst?	2.50%	Other?	2.50%
How easy did you find it to book your appointment today?								
	Very Easy	55.92%	Acceptable	32.24%	Difficult	8.55%	Unacceptable	3.29%
	<i>Rated Acceptable or better</i>		88.16%					
How did you rate the receptionists greeting to you today?								
	Very Good	70.67%	Acceptable	26.67%	Basic	2.00%	Unacceptable	0.67%
	<i>Rated Acceptable or better</i>		97.33%					
How comfortable do you find the waiting areas within the practice?								
	Very Good	36.77%	Acceptable	53.55%	Basic	8.39%	Unacceptable	1.29%
	<i>Rated Acceptable or better</i>		90.32%					
Did you find the waiting time for your appointment today to be..?								
	Very Good	50.33%	Acceptable	42.38%	Too long	6.62%	Unacceptable	0.66%
	<i>Rated Acceptable or better</i>		92.72%					
How did you find your consultation with your clinician today?								
	Very Good	75.00%	Acceptable	25.00%	Basic	0.00%	Unacceptable	0.00%
	<i>Rated Acceptable or better</i>		100.00%					
Overall, how do you rate the service you receive from Oakwood Surgery?								
	Very Good	59.06%	Acceptable	36.24%	Basic	4.03%	Unacceptable	0.67%
	<i>Rated Acceptable or better</i>		95.30%					