Grove House Practice

Local Patient Participation Report - March 2013

1. A Description of the Grove House Patient Group Profile.

As reported in last year's local patient participation report, Grove House Practice's Patient Participation Group (PPG) is now very well established and has been running since 2006. Its membership consists of patients who want to work with the Practice to discuss general Practice developments, issues and concerns and ways of overcoming them, who also have the time available to attend the meetings ten times per year between 5.30pm – 6.30pm (usually on a Thursday).

The Group was initially formed by the Business Manager by putting up notices in the waiting room and also inviting by letter some patients who had made formal comments or complaints about the services offered by the Practice.

The Group has lost 2 members since last year (one sadly died and one moved jobs and was no longer able to attend meetings) and is now actively trying to recruit new members – again, using the waiting room and inviting patients who have taken the time to write in and let the Practice know their views on the services offered. There are currently 10 members - 6 male and 4 female and their age range is as follows:

Age Range	Number of Members
18-26 years	0 (0%)
27-45 years	0 (0%)
46-65 years	5 (50%)
66 years and over	5 (50%)

2. The Steps the Practice has Taken to Ensure that the PPG is Representative of All Registered Patients.

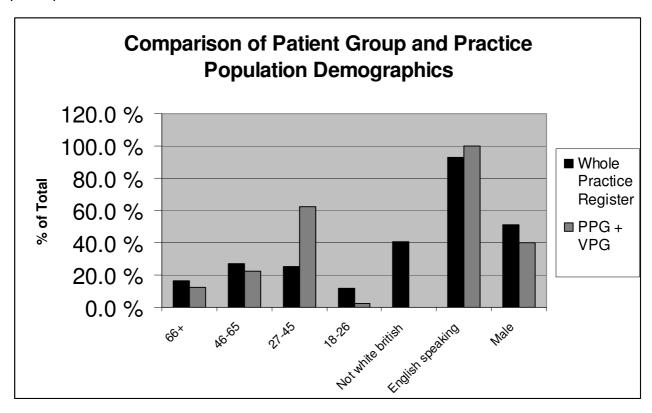
Recognising that the PPG alone was not fully representative of all registered patients, the Practice also set up a Virtual Patient Group (VPG) during 2011.

Members to this group are recruited by advertisements within the Practice - eg via a display in the waiting room (please see Appendix A for an example), as well as on the Practice website, via a patient leaflet and in the Practice Newsletter. The Practice also sends out regular emails (please see Appendix B) to all patients who provide an email address who are between the ages of 18 and 45 in particular to try and capture the younger age group of patients to join the VPG (where we know we are not well represented).

The VPG has grown over the last year and currently consists of 30 members - 10 male and 20 female and their age range is as follows:

Age Range	Number of Members	
18-26 years	1 (3%)	
27-45 years	25 (83%)	
46-65 years	4 (13%)	
66 years and over	0 (0%)	

This means that the Practice overall has a reasonably good representative patient participation as the chart below shows:



While the 27-45 age bracket is over represented in the Group, this is currently all made up of VPG members and experience has shown that not all VPG members contribute to every discussion. This, together with the relatively low representation on the slightly younger age bracket gives us, we feel, a reasonable representation.

However we have not yet been successful in encouraging representation from our non white British patients. We recognise that we need to continue to encourage *all* demographic groups to have a voice and we will continue to work with the PPG to increase membership accordingly.

3. Progress on PPG DES Year One Action Plan

As part of last year's PPG DES (2011-12) the Practice ran a survey to raise awareness of and get patient views on how we should respond to patients who book and then subsequently neither cancel nor turn up for a GP appointment (ie those patients who "DNA" their appointment). The results were collated and shared with the PPG and the VPG and an action plan based on these results was devised with the Groups' input.

Over the last 12 months, the Practice has worked on completing those actions and, in particular:

- we have introduced a 24 hour telephone service to allow patients to book, amend and cancel appointments when the Practice is closed (or if they don't want or need to speak to a Receptionist).
- we have also introduced an appointment text reminder service, which is available to patients who have signed up to the service.
- o and, based on some relevant research published last year, we have tried two

psychological approaches: firstly, we ask patients who book appointments in person at the desk to write out the appointment card themselves (as writing something down can help some people remember better) and secondly, we have replaced the notices in the waiting room about the number of DNAs with more positive notices about the number of people who have actually attended for their appointment (as positive affirmation can be more effective than negative messages)

Initially, the DNA rate for the Practice improved dramatically, but unfortunately this was not sustained. Obviously, the Practice DNA rate continues to be an issue that is of real interest to both the Practice and our patient groups and the Practice is actively working with the Patient Group to try and understand better why the improvement in DNA rate was not sustained what changes, if any, we now need to make to the actions already taken.

In addition, we will continue to remind patients to ensure that the Practice has their up-todate contact details so that they can make use of the 24 hour telephone booking and text reminder services.

4. How the Practice and the PPG determined the Priority Issues for Further Investigation/Development

In 2011, when the PPG and the Practice first discussed key priority areas they felt needed to be addressed to improve patient services, there were 3 priorities identified:

- 1) DNAs (Did Not Attends i.e. missed GP appointments)
- 2) Communicating Test Results
- 3) Communication with patients generally

The Practice and the PPG agreed that, due to the high DNA rate at the Practice at the time, this area was the first priority to be addressed during 2011-12.

In June 2012 the Practice and PPG agreed that how the Practice communicates test results to patients remained a high priority for patients and should therefore form the basis of the 2012-13 patient survey and action planning process.

5. How the Practice obtained the Views of its Wider Patient Population about how the Practice Communicates Test Results

Based on the PPG views, the Practice developed a patient survey and agreed the questions to be asked with both the PPG and VPG. It was agreed to provide both a hard copy survey and an online version (using Survey Monkey). The draft survey was discussed with the PPG at the meeting on July 2012 along with an online version for 'Survey Monkey' – and both the online survey service and the survey questions were agreed at that meeting. The final survey form is shown at **Appendix C**.

The Practice ran the survey during August and September 2012 as follows:

- A display was placed within the waiting room (please see Appendix D) to inform patients what the survey was all about, why it was being conducted and to confirm that it had the approval of the Patient Groups.
- Every day during the survey period, survey forms and pens were placed on each chair in the waiting room - during different periods of the day and at times when patients were coming in for clinics (including our Thursday evening and Saturday morning surgeries).

 The survey was also advertised on the Practice website during this time and all members of the VPG were sent it by email.

It was agreed that this gave a wide variety of ways for patients to take part in order to enable as many returns as possible.

The Survey ran for a total of 5 weeks and 342 responses were received which were then analysed by the Practice.

The results of the analysis were shared as follows:

- 1. with the PPG at their meeting in September 2012
- 2. with Practice staff and clinicians in a Practice meeting in October 2012.
- 3. with the wider Practice patient population via a display in the waiting room (please see Appendix E)
- 4. via the Practice website www.grovehouse.co.uk/patient_surveys.shtml
- 5. with the VPG via their monthly e-bulletin (please see Appendix F).

<u>6. A Summary of the Results of the Practice Survey about Communicating Test</u> Results

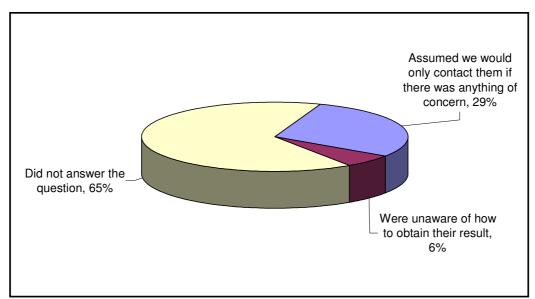
Out of the 342 patients who completed a survey, 302 confirmed they had a blood test, x-ray or ultra-sound with the past year.

Of those 302 patients, 204 said that they were aware of the results of their test, 70 said that they were not aware and 28 patients did not answer the question.

For those 204 patients who knew their test results, we asked if they were aware of the results because:

- a. we had notified them of the results -77 said yes, we notified them.
- b. they had contacted us for the results 109 said that they contacted us.

For the remaining patients who said they did not know their test results, the pie chart below shows why patients did not contact the Practice to obtain their results:



The survey also asked if the patient had been informed *when* their results would be available by the GP/ Practice Nurse at the time their test was ordered: 152 respondents said yes they were informed and 108 said that they were not informed.

When asked if the patient had been informed *how* to obtain their results by the GP/Practice Nurse at the time their test was ordered, 147 respondents said that they

were informed and 121 said that they were not informed.

The final question on the survey was an open question, asking if there was anything the respondent felt Practice could do to improve how we communicate test results and 187 comments/suggestions were received. Some comments made here were very positive about the current service while others made suggestions for improvements – for example:

- No improvement needed
- The Practice should inform and communicate no matter what the result
- The service is good, satisfactory or excellent
- A phone call or letter from the Practice no matter what the result
- Results should be available online or via e-mail
- A text message to say when results are available

Of the 187 comments made, 86 (46%) were positive (or felt the current service did not need to change) and 85 (45%) were suggestions for improving the service. The remaining comments were either jokes or obscenities.

The key suggestions for improving the service can be summarised as follows:

Suggested service improvement	Number of respondents who made the suggestion
Practice to inform patients that test results are ready by:	
a) phone (provide separate telephone number)	18 (21%)
b) text	10 (12%)
c) letter	9 (10.5%)
d) email	9 (10.5%)
e) providing direct online access to results	5 (6%)
f) any appropriate means (no detail given)	27 (32%)
Provide some sort of info sheet for patients when tests are	7 (8%)
ordered which explains how and when to obtain the results	,

These suggestions were then discussed both within the Practice and with the PPG to consider which ones were actually feasible currently and an action plan drawn up to address the issues raised by the survey results.

7. Details of the action plan developed as a result of the survey about Test Results

There are a number of suggestions made that the Practice cannot currently accommodate (eg: it is not currently possible to provide a separate phone line into the Practice and we currently have no ability to provide direct online access for test results) However, the Practice is happy to consider these suggestions in the future.

In the short term, the key outcomes/actions agreed to improve how the Practice communicates test results are as follows:

7.1 Although the Practice's current clinical system is unable to provide a text information service to notify patients when their test results are available, this system is being withdrawn from the market in October 2013 and the Practice has therefore taken this need into account when assessing the alternative clinical systems available to help decide which one to choose. We will be moving to EMIS Web in July 2013 and we are informed that this system *does* have a text service available for this purpose. We expect to be able to start offering a text communication about test results in the late Summer this year.

- 7.2 The Practice has developed a patient information card (please see **Appendix H**) which outlines how long test results usually take to come back to the surgery and how to access these results. All clinicians and Reception have a stock available and these cards are now in use.
- 7.3 The Practice is aware that some difficulties can occur when a patient requests test results and is given only part of the results, because the Receptionist did not realise that all the results were not yet back and on the system. Moving to EMIS Web should eliminate this issue as it has a simple the facility to show both clinicians and Receptionists whether test results for a particular patient are outstanding, pending or complete.
- 7.4 Some members of the PPG also expressed concern that the tests themselves may go missing and this can create problems if the GP does not realise particularly if the patient has memory problems. When ordering tests, the Practice clinicians will therefore ensure they make note of any patients they have concerns about (perhaps because of memory issues) so that they can check the results come in themselves.
- 7.5 Although the Practice is currently unable to provide an alternative number for test result queries, we will review how we advertise the main Practice telephone number in order to make patients aware when and how they can use this number to obtain test results.

The full Action Plan is shown at **Appendix G.**

8. Details of the steps taken by the Practice to provide an opportunity for the PPG to discuss the contents of the action plan about Test Results

From the analysis of the 342 responses the Practice, together with the PPG, agreed the key findings from the survey and confirmed the actions that the Practice needed to take to improve the service. These were specifically discussed at the PPG meetings in September 2012, December 2012 and January 2013. The PPG have confirmed that the Practice should now implement the agreed changes and have asked that both they and the VPG are kept aware of progress with regular updates.

The latest progress was discussed at the PPG meeting in January 2013 and the next steps were agreed and recorded on the Action Plan, as outlined at **Appendix G.**

9. About Grove House Practice – a summary of services

Grove House Practice is situated in St Paul's Health Centre and shares the premises with Tower House Practice and a number of community services including District Nurses and Health Visitors. The Practice is continually looking at ways to improve services for our patients. In addition to normal GP consultations, many services are offered in-house including:

- Chronic disease health reviews
- Blood tests
- Health Checks
- Minor surgery
- Baby immunisations
- Wart removal

- Foot checks for diabetic patients
- Warfarin (INR) clinic
- Weight Management
- Smoking Cessation
- ECGs and 24 Hour Blood Pressure Monitoring

Family Planning – including pill checks, implants and depo

injections

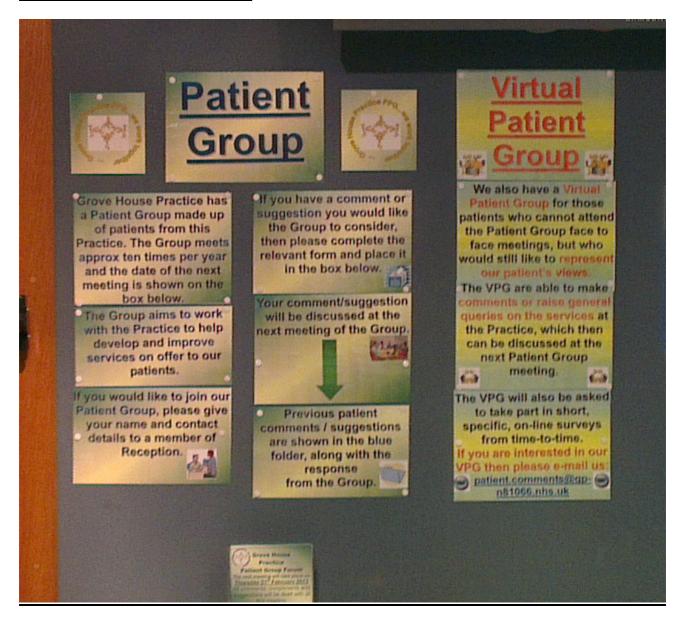
GP Appointments are available at Grove House Practice from 08.30-18:00 Mon to Fri and Nurse appointments are available from 08.20- 18:10 Mon-Fri. During 2012-13 the Practice took part in the Government's "Extended access" scheme and also offered both GP and Practice Nurse appointments on a Thursday evening and a Saturday morning.

Patients may book an appointment in the surgery via the telephone on 01928 566561 (which also includes our 24 hour telephone booking service) or they can book and cancel appointments via the appointments online service for a GP appointment (please see our website: www.grovehouse.co.uk for details). Patients may also order their repeat medication through this online service. Currently 3770 (35%) of our patient population have signed up to use our online services.

The Practice also has a dedicated cancellation line (01928 842577) if patients do not need to speak to a receptionist or cannot access the online services.

Most GP appointments are available to book up to 2 weeks in advance and the Practice Nurse team appointments are completely open. However, the appointments online service allows patients to book up to 4 weeks in advance for a GP appointment. All daily urgent requests to be seen that cannot be met by our normal appointment system are passed to the duty doctor and he/she triages and decides the appropriate course of action accordingly.

Appendix A Practice PPG and VPG Display



Appendix B VPG Invite email

GROVE HOUSE PRACTICE - VIRTUAL PATIENT GROUP

As you may know, Grove House Practice currently has a very active Patient Group that meets 10 times a year (at the Practice) and discusses various issues with the Practice that are of concern/interest to our patients.

In recent years, the Group has very successfully helped this Practice improve a number of areas, including our communication with patients, our telephone system and our GP appointment system.

But we recognise that – as a limited number of patients physically meeting at the Practice on a regular basis at 5:30pm on a weekday – they cannot and do not represent the full spectrum of patients at the Practice. Not everyone can make such meetings and, in particular, the group is under-represented by patients in the younger age ranges (under 50).

We are therefore set up a "Virtual Patient Group" (VPG) to sit alongside our existing Patient Group. The VPG members are able to make their own general comments/raise queries about the services at Grove House Practice on-line (for discussion at the next Patient Group meeting) and are asked to take part in short, specific on-line surveys from time-to-time.

We are emailing you, in the hope that you might be interested in taking part?

If this is something you'd be interested in finding out more about, please email us at patient.comments@gp-N81066.nhs.uk there is no obligation and you can resign from the Group at any time.

Hoping to hear from you soon Jacky Slator

Appendix C Test Results Survey

This was a double sided A5 sheet. The 2 sides are shown here:

Grove House Practice Test Results

Grove House Practice is aware that a some of its patients have concerns about how we communicate the results of blood tests, x-rays and ultrasound tests to our patients. With Blood tests, X-rays and Ultrasounds ordered every month, we currently try to strike a balance between reassuring the patient and keeping the workload to a manageable level. But, as patients needs change over time, we recognise the need to check that from time to time that balance is still correct.

With this in mind, the Practice and our Patient Groups feel that this is a priority service area to obtain the views of our patients.

So, this survey is aimed at obtaining your views on our test results service and how you feel we may be able to improve it .

We really appreciate your input to helping us improve our services for all our patients. Thank you in advance for your time in completing this survey

Once you have completed the questionnaire please place it in the box provided.

PTO

Q1:Have you had a blood test, X-Ray or ultrasound within the past year? Yes/No (If No please go to question 5)	
Q2:Are you aware of the results of that test? If Yes: A) Did we notify you of the results? B) Did you contact us for the results?	
If No: A) Did you assume we would only contact you if there was anything wrong? B) You did not know how to obtain your test results?	
Q3: Where you told when your results would be available when the GP/Practice Nurse ordered your tests? Yes/No	
Q4: Where you told how to obtain your results when the GP/Practice Nurse ordered your tests? Yes/No	
Q5: Is there anything we could do to improve our tests results service	

Appendix D

Promotional display for the Test Results Survey within the waiting room



Appendix E

Results display for DNA survey and promotional material within the waiting room



Edition 8







Welcome to the Grove House VPG e-bulletin to keep you up to date with all the latest news from the Practice and the Patient Group!

Patient Survey Results

The Practice, after agreeing with our Patient Group, ran a patient survey on Test Results during August and September 2012. The results of this survey are now available to view, please click on the link below:



Practice Patient Survey 2012: Test Results Service

Thank you to any members of our VPG that completed the survey, your views are extremely important to us.

We would be very grateful for any feedback you have regarding the results, you may e-mail your feedback to: patient.comments@gp-n81066.nhs.uk

All feedback will be discussed at the next Patient Group meeting and an action plan will be devised. All information will then be shared with our VPG.

Halton Peoples Forum for PPG members

As part of the development of Halton Clinical Commissioning Group (CCG) they would like to invite Patient Group and Virtual Patient Group members to take part in their Halton Peoples Health and will be holding two events:

FRIDAY 2ND NOVEMBER AT STOBART STADIUM, HALTON, WAS 7DZ FROM 10AM – 3.00PM (REGISTRATION FROM 9.30AM) OR WEDNESDAY 7TH NOVEMBER AT RUNCORN TOWN HALL, WA7 5DT FROM 6.00PM – 7.30PM (REGISTRATION FROM 5.30PM)

If you wish to attend either of the two events please book a place by contacting Faye Gilston on 01928 593479 or by e-mailing her at: FAYE.GILSTON@HALTONCCG.NHS.UK no later than Monday 29th October.

Refreshments will be provided.

Consultation launched on proposed changes to cancer services

We have been asked to inform our Patient Group and Virtual Patient Group of a consultation recently launched that intends on sharing the proposal to extend the services currently provided by The Clatterbridge Cancer Centre. The plans are to develop a new Cancer Centre for Cheshire and Merseyside, which would be built alongside the planned new Royal Liverpool Hospital site. The consultation is running from August 2012 until February 2013.

They want to ensure that Patient Group and Virtual Patient Group members have the opportunity to be informed and are able to respond either on-line or by post. For more information please click on the below link to view their website:

A new Cancer Centre



VPG - Your Questions and Concerns

If you have any questions or concerns you would like to be discussed at the next Patient Group meeting in October please forward them to: patient.comments@g-n81066.nhs.uk

Next Face to Face Patient Group Meeting

Thursday 18th October 2012 5.30pm



Minutes from the September meeting will follow over the coming week.

Appendix G Action Plan

Key Survey Outcomes agreed with the Patient Group	Actions	Progress	Review Comments (Progress last reviewed January 2013)
Some patients surveyed felt an information sheet that is given with the test form would be useful.	The Practice will devise an information leaflet that can be given to the patient with their test form.	November 2012 – A leaflet has now been devised; a stock will be given to Clinicians to give out when they send a patient for a test.	January 2013 – The information leaflet has been given to all Clinicians and Reception and is being given to patents when tests are
	The same information could be put onto the Practice website and in a Patient Information leaflet.	November 2012 - The information will be put on the website and is included within the 'How do I' Patient information leaflet.	being ordered. January 2013 – The same information is now on the Practice website and in the Patient Information Leaflet 'How do I'
Some patients surveyed felt that all patients who have tests should be notified of the results no matter what the outcome.	The Practice is currently looking for a new Clinical system due to the fact that the current system will not be available at the end on 2013. This gives the Practice an ideal opportunity to look at systems that have the facility to send out test result reminders such as an SMS.	November 2012 – The Practice is currently having demonstration sessions to look at possible Clinical systems and is taking this issue into account when choosing a new system.	January 2013 – The Practice has chosen to go with EMIS Web as our new Clinical system. This system has a facility to send SMS messages to patients stating their test results are available.
Some members of the Patient Group are concerned that tests themselves could be missed and if a Patient has memory problems they may forget to contact the Practice to check if their results have been received back from the lab. This creates concern that a serious diagnosis may be missed, as the Practice is unable to check if every result has been completed.	The Practice will look into ways to overcome this. 1) The GP / Practice Nurse who orders the test could take note of the patient if they feel there are any concerns with memory etc. 2) The Practice will look into a reminder service that may help with this concern as stated in the previous action.	November 2012 - This will be dependant on the Clinicians judgement and knowledge that the patient has a memory problem. November 2012 - The Practice will take this issue into account when choosing a new system.	January 2013 – All Clinicians are looking at this issue. January 2013 – The new Clinical system has a facility to see if all results for a patient have been returned to the Practice, or if there are any pending.
A percentage of patients surveyed expressed that patients should be given a designated telephone number to call for test results.	The Practice already specifies that a patient may call Reception to obtain any test results; if Reception is unable to give out results the patient will be asked to speak / see the Clinician.	November 2012 – Patients may phone the main telephone line 01928 566561 for results.	January 2013 – This information is being displayed with the results of the survey.

	The Practice will look at advertising this information and adding to the information sheet as discussed in action one.	November 2012 – This information will be advertised on the display within the waiting room and via the plasma. It will also be placed on the Practice website.	January 2013 – Action completed.
All information gathered from the survey needs to be shared with the Practice Patient Population in as many ways as possible, this should include promotions for upcoming services	Display of results and promotional information in waiting room, on the Practice website and in the new Virtually Up 2 date E-Bulletin to the VPG.	November 2012 – all the results from the survey and promotional information have been shared with our patients via the waiting room, the website and an e-bulletin has been sent to the VPG.	January 2013 – The survey results were displayed within the waiting room in January / February 2013 and placed on the Practice website.

Grove House Practice How to get a Test Result....



Some test results are available a week after the test. However, this timescale can vary depending on the test conducted and demand (see over), so please bear with us. Once the results have been sent back to the Practice, the GP or Practice Nurse may want to discuss them with you and if so we will contact you.

If you don't hear from us within the timescales shown over you are welcome to phone Reception if you have any concerns to check if your results have been received. Reception can also then advise you if the GP needs to discuss these results further with you. The exception is cervical smear tests where you will be notified direct by Cheshire Health Authority of your result.



You may phone Reception on: 01928 566561

The approximate turn around time for standard test results are:

- Blood tests 7 days
- X-rays and Ultrasound 14 days (Subject to the hospital sending in this time period)
- Cervical Smear test national target is 2 weeks. If the result has not been received after four weeks, please contact the surgery
- Pregnancy 3 days

Please note that this Practice has a strict policy regarding confidentiality and data protection. We usually only give test results to the person to whom they relate.

Grove House Practice, High Street, Runcorn. WA7 1AB www.grovehouse.co.uk

Appointment Cancellation line: 01928 842577
We also have a 24 hour automated service where you may book, check or cancel an appointment.

Last updatest December 2012