

PARTICIPATION REPORT 2015/16

The Patient Participation Group Development:

The purpose of a Patient Participation Group (PPG) is to ensure patients and carers are involved in decisions about the range, shape and quality of services provided and commissioned by the practice and the Clinical Commissioning Group (CCG). The principle is about getting local people, patients, carers and users engaged in planning local services and identifying local needs. Its function is to work closely in partnership with the practice to provide insight in to the patient perspective and provide constructive feedback with regards to the responsiveness and quality of services.

The Aim:

The aim of the Patient Participation Group (PPG) is to actively seek and research patient's views, suggestions and complaints through various sources such as practice surveys. This helps to improve both communication and understanding between both the practice and the patients. Feedback can therefore be acted upon in order to improve the quality of services being offered to the patients. It encourages patients to be actively involved in the decisions made by the practice and the decisions about the range and quality of services provided by the practice. It enables patients to become involved in their own care and empowers them to be able to make change through opportunities such as patient forum meetings, and online routes such as 'NHS Choices' and 'IWantGreatCare'. Furthermore, it is a means to motivate patients to take responsibility for not only their health but their family's health. One of the roles of the PPG which aims to address this is organising health promotion events and improving health literacy.

Practice Profile:

The PPG is representative of the practice population. The practice population consists of 4,765 patients who are of a varied aged group of a diverse multi-cultural and varied ethnic background. The ethnic representation and social class level is reflected in the practice geographical location. Further details are provided later in the report.

The Structure of the Group:

Adequate representation from all patient groups is key. This includes minority groups such as carers, care groups, nursing homes, unemployed people, and people with mental health issues, learning disabilities, and drug users within the community as well as LGBT groups. In order to ensure this adequate representation, all staff including practice champions, actively invite all groups of patients to a face to face patient group meeting. These meetings are held quarterly on an annual basis. Timings of the meetings are alternate, AM and PM,

taking into consideration the working patterns of patients and the high level of unemployment to maximise attendance rates. Upcoming meetings are published on the Practice Website and also advertised in house on the Practice notice board. External Stakeholders are also encouraged to contribute and actively invite patients.

In order to ensure that various group will engage in the PPG meetings all patients including minority groups within the population are invited to attend. The following steps are taken to recruit patients and to ensure that all patients are actively represented.

The following methods are used to encourage patients to join the PPG :

- Screen message is displayed in the waiting area in the practice
- Practice Leaflet invites patient to participate
- Publishing PRG meetings on the practice website.
- All staff actively encouraging patients to join the group
- Telephone contact is established with hard to reach group, less able bodied, housebound patients and carers.
- The practice is working with other practices to engage with the community to encourage participation.
- Word of Mouth

The Group representation is as follows:

Sex: Male -51% and Female-49%

Age Groups

17-24 -3%
25-34 - 4%
35-44 - 16%
45-54 - 38%
55-64 -27%
65-74 - 9%
Over 75- 3%

Ethnicity

White & Black Caribbean - 1%
White & Black African - 2%
Asian or Asian British - 5%
Black or Black British -15%
Black African -9%
Afro-Caribbean - 57%
Any-Other - 2%
White Irish - 4%
Chinese - 1%
Pakistani - 4%

Other Groups: We have 2 patients in residential/nursing homes, 56 patients on the LD register and 68 registered carers.

Communication:

We correspond with the group members by:

- Practice Website
- In House leaflets
- In House communication board
- Text messaging
- Email
- Telephone
- Face to Face

All meetings are Planned and publicised on the practice website and in house on the electronic notice board. Hard to reach groups are contacted and informed verbally of meetings. External stakeholders are also encouraged to invite patients.

In order to recognise any discrepancies between the Patient Participation Group and the Practice population, monitoring forms are completed by patients during these meetings. Outcomes of this revealed that there is a marginally higher representation of Male patients than Female.

Hard to reach groups that are not well represented are mainly patients residing in Nursing homes and housebound patients. Although staffs from the Nursing homes and Carers were invited they were unable to attend. To ensure that their views are represented, housebound patients were contacted via telephone and the views collated and raised during the PPG meetings.

SURVEY

In order to gauge patient satisfaction and identify areas of improvement the practice in conjunction with Harness Network agreed to conduct a patient survey. The aim of the survey was to actively seek patient's views on the current service and identify areas in which the practice could improve. Areas and questions on which to conduct a practice survey were identified and agreed, clearly setting out areas of priority for the survey, with a view to Improving Access, Choice & Experience.

The priorities for the survey were discussed and an agreement was reached to conduct the survey on access as well as the Family and Friends Test. Results of which will assist the practice in implementing an action plan. The questions were developed with Alpha based on improving patient satisfaction and the agreed action plan was devised from issues and problems identified from complaints and during Patient Participation Group meetings which were also reflective in the Family and Friends Test. A series of questions relating to Family and Friends was asked to see how the patients rate the surgery. Questions were also asked about the practice opening hours.

Two surveys were conducted over a 4 month period from September 2015 through to January 2016. The 1st survey was completed in September 2015 to October 2015. A total of 20 patients responded and completed the questionnaires. The results of which were collated and analysed, producing a report referred to as Q1.

As part of the Outcome improvement for the Harness network the Stonebridge Practice repeated the survey in Jan 2016 (referred to as Q2) to compare with the previous baseline data gathered in Sept/Oct 2015 (referred to as Q1) to measure impact of improvements made at the practice

Results of the Survey

Q1 survey- completed September-October 2015:

A total of 22 responses were received, of which 40.9% (9) were male, 59.1% (13) were female, 0% (0) were aged 18 or under, 35% were aged 19-34, 55% were aged 35-64, 10% were aged 65-74, 0% were over 75.

Q2 survey- completed January 2016: A total of 20 responses were received, patient demographic were as follows: 53% were male, 47% were female, 10% were aged 18 or under, 30% were aged 19-34, % were aged 35-64, % were aged 65-74, % were over 75.

While analysing this survey data we also looked at the National GP patient postal survey which would have been completed by practice patients over the period of Jan to Mar 2015. The Harness Care network of practices all conducted patient surveys during this period, enabling the network to bench mark the results of all the survey. While analysing this survey data we also looked at the National GP patient postal survey which would have been completed by practice patients over the period of Jan to Mar 2015.

Results of the patient survey revealed the following:

100% of 20 patients thought the GP was very good or good at giving the patient enough time (National 85%). 85% of 20 patients gave a 5 star rating to “being involved in decisions about their care” compared to Harness baseline (avg) of 51%. 85% gave a 5 star rating to “was the surgery clean” compared to Harness baseline of 53%. 90% of patients said they are very satisfied or fairly satisfied with the opening hours of the surgery (National 75%).

Negative:

35% of 20 patients said they were able to get an appointment to see/speak to someone (National 73%). 25% said they were able to get an appointment but had to ring back closer to the day (National 12%).

13.6% gave a 5 star rating to “is it easy to get an appointment” compared to Harness baseline of 42%. 31.8% of patients said they always or almost always get to see a GP they prefer (National 37%).

Below is of the results of the Q1 and Q2 survey’s detailing overall practice scores and benchmarking against Harness Practices and National GP Survey from January 2015- March 2015.



Stonebridge Practice
Survey 15.pdf



Stonebridge Practice
Q2Survey 16.pdf

Action plan

The plan was devised based on the summary of the evidence relating to the survey findings conducted in 2015/16. The Practice will implement the proposed action plan which has been agreed with the PPG and was also presented to the Patient forum held on the 24th February 2016. Below is a copy of the action plan.

Action Plan for Year 2015/16

Priorities for Action	Proposed Changes	Time Frame
See a GP in 48 hours	<p>The practice will amend the appointment system to including the following: On line appointments will now published every two weeks. Advance bookings will be offered to the over 75, venerable patients and Carers. Evening appointments will also been created to enable those working to be seen from 6PM-7:30 PM on Monday and Tuesdays. Nurse's appointments will also be amended to include evening sessions from 6PM-7:00 on Tuesday and Wednesday. In order to reduce the number of DNA the new appointment system encourages patients to use the walk in service. Review of the appointment system has revealed a reduction in the number of DNA appointments. This has resulted in more patients being offered on the day appointments to see their GP's.</p> <p>Patient's feedback has been well received. Patient suggested that the practice could display information, thanking patients for their co-operation in helping to reduce the number of DNA.</p>	July 2016
Telephone Access	Some patients still have difficulty contacting the practice by phone as the line seems to disconnect. The practice manager will inform IT service desk of this issue. Patients were asked to try to contact the surgery after 10AM as this should reduce waiting times on the phone.	Sept 2016
Speak to a doctor on the phone	The Practice will now increase the number of telephone slots available for each clinical session. Telephone consultations will now available both AM and PM on a daily basis. This information has been publicised at PPG meeting and in house. Patients and Carers have also been verbally informed of this service.	July 2016
Reception area	Patients have seen an improvement in the queuing system. Notices will now be displayed asking patients to sit in the order in which they arrive. Patients will reminded to try and come into the surgery after 10AM to collect and order prescriptions as this helps to deal with the patients that attend the walk in clinic.	May 2016

The patient participation report will be published on the Practice website www.thestonebridgepractice.co.uk. Results of the Survey are displayed in the practice waiting area including all clinical rooms. Hard copies are retained at the reception and will be made available upon request.

Positive outcomes of patient involvement

Patient involvement has enhanced the relationship between the Practice and increased patient satisfaction. Results of which reflect in the Practice Survey. The Practice and patients now have a forum where both parties are able to address concerns and discuss mutual topics of interest. This offers offer the opportunity to communicate developments and discuss areas identified for improvements. The Practice will continue to update the practice website and will also continue using the text messaging system to cascade messages and improve communication with patients. This should enable patients to gain easy access to a wealth of information, ranging from access to services, health information and self-management of diseases. The practice continually tries to improve against difficult pressures from raising demand and constrained resources

The 2015/2016 report reveals that patients are satisfied with the care received from their GP's. The practice will make every effort to improve the level of service provided to patients. The report will be advertised on the practice website www.thestonebridgepractice.co.uk and will be circulated by email to PPG representatives.

The plan was completed with the involvement of everyone who attended the PPG, and will be owned jointly by members of the group and the practice. The plan will be revisited annually and may change according to the changing needs of the practice and patients it serves.

Practice Core Opening Hours:

Monday	9:00-18:30
Tuesday	9:00-18:30
Wednesday	9:00-18:30
Thursday	9:00-13:00
Friday	9:00-18:30

Extended Hours

Monday	18:30-19:30 (provided by GP)
Tuesday	18:30-19:30 (provided by GP & Nurse)
Wednesday	18:30-19:00 (provided by Nurse)

Out of Hours:

Patients can access the following services when the surgery is closed.

Care Uk is the service covering the surgery when the practice is closed at weekends and Bank Holidays. Please contact Care Uk for Emergencies only Tel: 0300 130 3015

Patients can also contact - NHS Direct 24hour advice line Tel: 111 from any landline or mobile phone free of charge. Or Tel: 0845 4647 from some parts of the country. You can also visit www.nhsdirect.nhs.uk. Health information, opening hours and out of hour's services information can all be obtained on the practice website www.thestonebridgepractice.co.uk

Summary

This exercise will enable the practice to focus on objectives and priorities for future plans and identify continuous needs for development. It has helped improve the relationship between the Practice and patients. It has offered both parties the opportunity to actively engage in development. The practice will continue to strive to improve the level of customer service offered to patients.

We value the support and constrictive relationship we have the PPG and will continue to work to expand the involvement of patients, carers and local community.