

Almond Road Surgery, St Neots

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?

- *Not our first year*

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?

The PRG is still representative of the practice population as the demographics of the practice are the same as last year. The practice could always benefit from having a wider group of patients representing various groups/ethnicity/age/learning disabilities/disabled etc. within our PRG so the practice has an ongoing recruitment program trying to engage new members to the PRG by advertising the group on our practice website and displaying join up forms in the waiting room. Doctors also raise the option to join the PRG whilst in consultation with patients from various groups as mentioned above.

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:

- 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?

- *Emails were sent to the PRG members asking them for their input regarding questions / priorities for this years practice survey. The practice asked the PRG members in that email if they would like to go with the same questions as the previous year to get a like for like comparison, or, have a mix of questions from previous year with new questions suggested by the PRG, or, all new question input by the PRG. (see evidence A)*
- *Once the feedback from the PRG members had been received regarding the priority questions to be asked a final draft practice survey was drawn up and circulated to the PRG members and partners by email asking them if they were happy with the final proposed questions before the survey went live in the next few days. (see evidence B)*
- *Feedback received by email from the PRG members and partners on the final draft practice survey questions. The PRG members and Partners where happy with the final practice survey questions and were keen to see the results.*

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

- *PRG members felt a like for like year on year comparison would be useful as it would give a good benchmark on how the surgery was performing year on year.*
- *The PRG felt that there were no more relevant questions to the practice than the ones asked in previous year and that the questions from the previous year covered all the areas the PRG and Practice were looking for patient opinion on..*
- *PRG members suggested some wording changes to question 2 regarding minor illness nurse and accessing this service.*

The practice matched the priorities set out by the PRG in the patient survey as follows – the description below identifies how we matched the priorities above to each question in the patient survey.

- *How easy do you find it to book an appointment with the Doctor or Nurse? – This matches the priorities of the PRG as they wanted to see a year on year comparison to give a benchmark against performance.*
- *We introduced a new service to the practice in Jan 2012, a Female Minor Illness Nurse. Patients have the choice to see the Doctor or Minor Illness Nurse when attending the Sit & Wait. Did you know that when booking a Sit & Wait appointment you can request to see the Minor Illness Nurse? -- this matches the priorities of the PRG as they wanted to see a year on year comparison to give a benchmark against performance. As well as meeting the priority of there are no more relevant questions than the ones asked in the previous year. This question incorporated the wording changes suggested by the PRG meeting their priorities around the Minor Illness Nurse and accessing this service.*
- *How important do you think it is for the practice to have a female doctor? – This matches the priorities of the PRG as they wanted to see a year on year comparison to give a benchmark against performance. As well as meeting the priority of there are no more relevant questions than the ones asked in the previous year.*
- *Do you think it is possible to speak to a doctor over the phone? – This matches the priorities of the PRG as they wanted to see a year on year comparison to give a benchmark against performance. As well as meeting the priority of there are no more relevant questions than the ones asked in the previous year.*
- *When contacting the surgery by telephone how easy do you find it to get through to a receptionist? – This matches the priorities of the PRG as they wanted to see a year on year comparison to give a benchmark against performance. As well as meeting the priority of there are no more relevant questions than the ones asked in the previous year.*

- *How helpful do you find the receptionist? – This matches the priorities of the PRG as they wanted to see a year on year comparison to give a benchmark against performance. As well as meeting the priority of there are no more relevant questions than the ones asked in the previous year.*
- *What times do you think the surgery is open? – This matches the priorities of the PRG as they wanted to see a year on year comparison to give a benchmark against performance. As well as meeting the priority of there are no more relevant questions than the ones asked in the previous year.*
- *Are you happy with the reception & waiting room areas? – This matches the priorities of the PRG as they wanted to see a year on year comparison to give a benchmark against performance. As well as meeting the priority of there are no more relevant questions than the ones asked in the previous year.*
- *Since the introduction of MJog a text messaging reminder service, patients are now also invited to attend chronic disease management clinics by either text message or automated telephone call. Do you think this service is a good addition to the practices service provision? – This matches the priorities of the PRG as they wanted to see a year on year comparison to give a benchmark against performance. As well as meeting the priority of there are no more relevant questions than the ones asked in the previous year.*
- *How likely are you to recommend your doctor to family or friends? – This matches the priorities of the PRG as they wanted to see a year on year comparison to give a benchmark against performance. As well as meeting the priority of there are no more relevant questions than the ones asked in the previous year as it gauges patient satisfaction with doctors, receptionist & the practice as a whole.*

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 the survey was carried out between 1st April 2013 & 31st March 2014. The Survey was distributed to patients in the week commencing 10th February 2014.

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?

- *Smart Survey – online survey website*
- *Paper Survey*
- *Website Link*
- *All answered received via one of the three methods above were then collated and input to Smart Survey website by the Practice Manager. The practice still holds all completed paper survey results within the practice to back up the validity of the data entered into the Smart Survey Website.*
- *These method were chosen to give us and the patients the widest possible access to the survey, ease of use and being able to ensure collection of enough completed surveys to give us the year on year comparison the PRG wanted. So the same number of completed surveys was targeted as the previous year.*

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

The same number of patient responses were targets as in the previous two years giving the practice the most accurate comparable year on year analysis of performance as possible making the survey credible.

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

- *See Evidence C*

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 practice sought the views of the PRG and their feedback on the findings of the practice patient survey 2013 by email. The email of the survey results was sent to the PRG on the 4th March 2014. (see evidence D). The practice included the practice's action plan in the practice's feedback comments within the patient survey results document & the PRG's feedback responses show their agreement to the proposed action plan points.*
- *Responses were received by email back from the PRG members from the 3rd March 2014 to 10th March 2014. PRG members who did not provide email written response the practice took this as they had no comment on the survey results and were happy with the results.*
- *Proposed changes highlighted from the survey are*
 1. *Practice to improve patient education and communication of services provided by the practice to patients by a campaign using various methods (website, posters, leaflets, verbal communications etc)*
 2. *Additional staff training to constantly improve communication and service provided.*

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?

Summary of Action Plan / Points – 2013

Area for Action	Proposed
Advertising Minor Illness Nurse service provision available within the practice	Ensure advertising of the Minor Illness Nurse is easily visible on both the website and in the Waiting Room. Explaining to patients the types of illness the Minor Illness Nurse can treat. Reception staff to receive additional training on sign posting patients to better utilise this service. PM to action
Female GP	Ongoing recruitment of female Locums wherever possible. Training of second practice nurse to be Minor Illness Nurse – Partners to action & monitor
Speak to a doctor over the phone	Re-advertise this service in the waiting room and on the practice website. Dr Wrigley to action. Additional training for receptionist staff on allowing patients to access this service. PM to action
Contacting the surgery by telephone	Ongoing monitoring of telephone system / demand. Feedback to partners / PRG when and if necessary when problems occur. PM to action
Reception & waiting room areas	Partners to look into possible funding streams with a view to changes in the future. Partners to action.
Helpfulness of Receptionist	Staff to have customer care refresher course within the next 12 months. PM to action
Opening Times	To educate patients for 2014/2015. Place larger poster in waiting room and ensure practice website displays the correct information. PM to action
Rewording of Question 10 for 2014/2015 patient survey	Reword question 10. Change wording to "If a stranger asked you to recommend a Local Doctors Surgery how likely are you to recommend Almond Road Surgery? PM to action

The above action plan directly relates to the patient survey results and takes into account the patients feedback, practice feedback, PRG feedback and translates all the feedback into the above action plan. If you look at Evidence C you will see this quite clearly from the patient survey individual questions and the feedback sections contained within each questions results.

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

- *The PRG was consulted to agree the action plan at the time the practice emailed the PRG members the patient survey results including practice feedback document & requested their feedback on the results as well as the practice feedback / action plan. In the published version of the practice survey 2013 results you can see the PRG feedback and agreement to the action plan points (see evidence C)*

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?

- *There were no elements raised through the patient survey that have not been agreed as part of the action plan*

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

- *This section is not applicable to our practice*
- *No contractual changes are being considered.*

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

- *The practice has included in the published patient survey results for 2013 the following action plan / point update from the 2011-2012 Action Plan*

Feedback on Action Plan / Points – 2011

Area for Action	Proposed
Educate patients on how to access service "speak to a doctor over the phone"	Ongoing advertising of this service although there is not much more that we can do than we are already done / tried.
Ease of getting through to the practice by telephone	Ongoing constant monitoring of telephone system takes place on a daily basis
Opening hours – patient education due to wide variety of responses in survey show patients don't actually know when the surgery is open & that	Annual updates of the Practice booklet and ongoing review of opening times on the website. A5 poster in Waiting room advertising Opening hours, Consultations hours for Both Dr & Nurse clinics as well as HCA clinic hours..
Ongoing recruitment to PRG	Ongoing advertising the opportunity to join the PRG in the waiting room and on the practice website. Join up forms are available in the waiting room and on the website.

2012/13 Action Plan

- The practice has included in the published patient survey results for 2013 the following action plan / point update from the 2012-2013 Action Plan

Feedback on Action Plan / Points – 2012

Area for Action	Proposed
Advertising Minor Illness Nurse Service provision available within the practice	Ongoing review of patient education and finding clearer ways to inform patients of the availability of this service.
Female GP	2 nd Minor Illness Nurse has almost completed her training. Training will be complete within the next 2 months. The practice will then be able to offer access to a Minor Illness Nurse every day Monday to Friday. The practice when employing locums always looks for Female Locum first. This is successful 95% of the time.
Speak to doctor over the phone	Despite the practices advertising of this service the message does not appear to be getting across to the patient. Clearer ways of patient education need to be found although there is not much more that we can do than we are already done / tried.
Contacting the surgery by telephone	Constant monitoring of telephone system takes place on a daily basis. Patient demand in 2013 and reception vacancy and subsequent recruitment problems have affected our reception staffing levels. This has now been resolved although patient demand is still higher than usual.
Reception & Waiting Room Areas	New flooring has been laid. Partners have identified further areas for improvement with new chairs being earmarked for 2014/2015 funding streams allowing.

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)

Opening Times

	Morning	Afternoon
Monday	08:00 - 12:30	13:30 - 18:00
Tuesday	08:00 - 12:30	13:30 - 18:00
Wednesday	08:00 - 12:30	13:30 - 18:00
Thursday	08:00 - 12:30	13:30 - 20:00
Friday	08:00 - 12:30	13:30 - 18:00
Weekend	<i>closed</i>	<i>closed</i>

Patients can access the service between 08:00 to 18:00 Monday to Friday, with the out of hour's service covering from 18:00 to 18:30 Monday to Friday. Out of hours cover the weekends from 18:00 Friday till 08:00 Monday morning when the surgery reopens.

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.

- *The practice is not commissioned to provide extended hours although the practice does offer extended hours as follows*
- **Doctors' appointments as follows**
 1. *appts from 08:00 on Thursday & Friday mornings*
 2. *appts up to 19:20 on Thursday evenings*
 3. *appts up to 17:20 on Monday to Friday excluding Thursday as late night up to 19:20*

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: **JULIA BOYD**

Signed:

Surgery code: **D81082**

Date: **17th March 2014**

Website: **www.almondroadsurgery.org.uk**

FOR AT USE ONLY

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

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