

Wembury Surgery

Local Patient Participation Report

Date Published: 10th March 2012 - the report is available to view on our website www.wemburysurgery.co.uk, at reception and through our Newsletter

A description of the profile of the members of the PPG:

Wembury Surgery Patient Participation Group has 4 male and 7 female members; ethnicity of all PPG members is currently white British. The age of the group ranges from 17 years to 82 years. There is individual representation for learning disabilities, the housebound and the elderly.

A description of what steps the Practice has taken to ensure that the PPG is representative of its registered patients and where a category of patients is not represented then what steps have been taken by the Practice in an attempt to engage with those patients:

Wembury Surgery had an active PPG which has been in operation for several years. However there was a need to expand the group in order for it to be as representative of the practice population as possible.

Using the 2010 NHS Devon Practice Profile and our own local knowledge we identified that our Practice had an unusually high number of elderly patients. The practice has very few ethnic minority patients and no social deprivation; however there are a significant number of patients with learning difficulties. The age range of our patients is Under 25 years 19%, 25 to 44 years 23%, 45 to 64 years 27%, 65 to 74 years 18% and 75 and over 13%. 51% of our patients are female and 49% are male.

At the May 2011 PPG meeting it was agreed to advertise the PPG at the village Summer Fair, publish an article in the Summer Newsletter and on our web site and in the local village monthly parish magazine.

We decided to offer a two tier commitment; firstly to seek members willing to meet regularly and secondly to seek members who, though unable to commit to a regular meeting, would be happy to be contacted by e mail for us to canvas opinion.

As a result of these actions we were able to gain a number of new members; however we felt that some marginalised and vulnerable groups were still not being fairly represented so we selected a number of patients who we felt would be able to represent these groups, namely those with special needs and the housebound, and invited them personally to join the group.

A description to be entered in around how the Practice and the PPG determined and reached an agreement on the issues which had propriety within the Local Practice survey:

The expanded PPG met in September; the group was representative of most patient groups, including young people, those with disability, the retired, those in employment, families with young children and the housebound. The group discussed ideas on the areas to be covered by the local patient survey; results of previous surveys were analysed together with general feedback from patients. The PPG were asked to canvas opinion from patients as to what sort of questions they would like included in the survey. It was agreed to meet again in October to finalise the survey and in the meantime start to identify areas to prioritise.

In October the PPG met to finalise the survey. It was agreed that questions should be representative of the patient experience from initially making an appointment, visiting the surgery, possible interaction with other health services, and overall reflection of patient experience. The surgery also sought the views of staff in determining priorities.

The unanimous view was that a bespoke carefully targeted questionnaire with open ended questions would deliver the most meaningful results.

A description of how the Practice sought to obtain the views of its registered patients

The practice compiled and issued a survey based on the recommendations of the PPG. The format of the survey was a number of open-ended questions where respondents had the opportunity to use free text to write what they want. The survey was printed on A4 double sided paper and was available in the reception area of the waiting room. It was also put in prescription bags of patients collecting medication. An electronic copy was available to complete on the surgery website, in the form of an automatic pop up whenever anyone visited the web site. All patients who had registered for an e mail copy were sent one. The Voluntary Warden's issued a copy to housebound patients. The local Parish Magazine was used to advertise the fact that the survey was available to complete at the surgery or on the website.

A description of how the Practice sought to discuss the outcomes of the local survey and the Practice's action plan together

The survey results were collated and the results analysed. Because of the open ended nature of the questions, all comments were listed and grouped into common themes. The results were summarised and a copy of the summary together with a copy of the complete survey results was issued to the PPG in preparation for a meeting which was subsequently held in January. All members of the PPG attended this meeting together with the Practice Manger and two of the Partners.

A description of the findings or proposals that arose from the local Practice survey and what can be implemented and if appropriate reasons why any such findings or proposals should not be implemented

The following was discussed and agreed at the meeting held in January.

We asked our patients if they were content with the general layout of the surgery.

The majority of patients responded positively to this question; however there were a number of specific comments about lack of privacy and crowded seating arrangements.

Action:-

Remove unnecessary chairs and rearrange the remaining.

Extend the privacy screen around the reception area to enable telephone conversations to be more discreet.

Improve signage, asking patients to stand away from the reception desk when another patient is being dealt with by reception.

Clinicians to give patients a note to hand to the reception staff when asking the patient to make an appointment for something of a sensitive nature i.e., to book a smear test etc.

We asked our patients if they were happy with the appointment system.

The majority of patients indicated that they were happy with the appointment system; however there were a number of negative comments and the group agreed that some of these were the result of patient experience prior to the changes made in the last few years.

Action:-

Advertise how our appointment system works, more effectively

Increase the frequency of newsletters

Install display screens in the waiting room

We asked our patients what would be the preferred time of day to see the doctor or nurse?'

The results of the survey indicated that 50% of patients completing the survey would prefer a morning appointment, 25% would prefer an afternoon appointment and 25% do not mind.

Action:-

Amend clinics to reflect this with more Chronic Disease Management appointments available to book from 8.30.

We asked our patients to tell us of one positive and one negative experience had when dealing with the surgery or other local health services e.g. hospital and community services.'

Of the 107 positive comments, 8 related to other local health services.

Of the 46 negative comments, 13 related to the surgery.

Clearly, overall patient satisfaction is high. Looking at the negative comments, 6 were about waiting times for appointments, and the other 7 were individual in nature.

Action:-

Comments have been shared with the staff and used as part of in-house training.

Report feed back about 'other local health services' to the PCT

We asked our patients if there were aspect of our dispensary service that they would like to see improved?'

Comments about the Dispensary were generally very positive with some suggestions made

Privacy and congestion around the 'hatch' is an issue.

Action:-

Only keep one chair near the hatch for patient waiting to collect prescription

One patient suggestion was that the surgery remains open, between 1 and 3 for the collection of prescriptions.

Action:-

The PPG recommendation that we close for one hour at lunch time rather than two hours was put to the whole staff at a Staff Meeting. The view of the majority of staff was that at the present time this would have a significantly detrimental effect on the work achieved during this time. Bearing in mind that only one patient made this suggestion it was decided that we would defer this change of hours for the foreseeable future.

One patient suggestion was to operate a delivery service.

Action:-

The PPG recommended that, as there was only one comment of this nature we don't consider it priority at the moment

Two patients suggested that medication be issued with a 2 – 3 month supply.

Action:-

Department of Health and PCT guidelines recommend monthly prescriptions to ensure patient safety and reduce medicine wastage. This information to be conveyed to patients effectively.

We asked our patients if there were any Health Care Services currently unavailable at the surgery that they would like to be made available.'

There were 11 requests from patients asking for a Chiropody service.

Action:-

The surgery to write to Commissioning board to request consideration for Podiatry service at the surgery.

There were 6 requests for more physiotherapy appointments.

Action:-

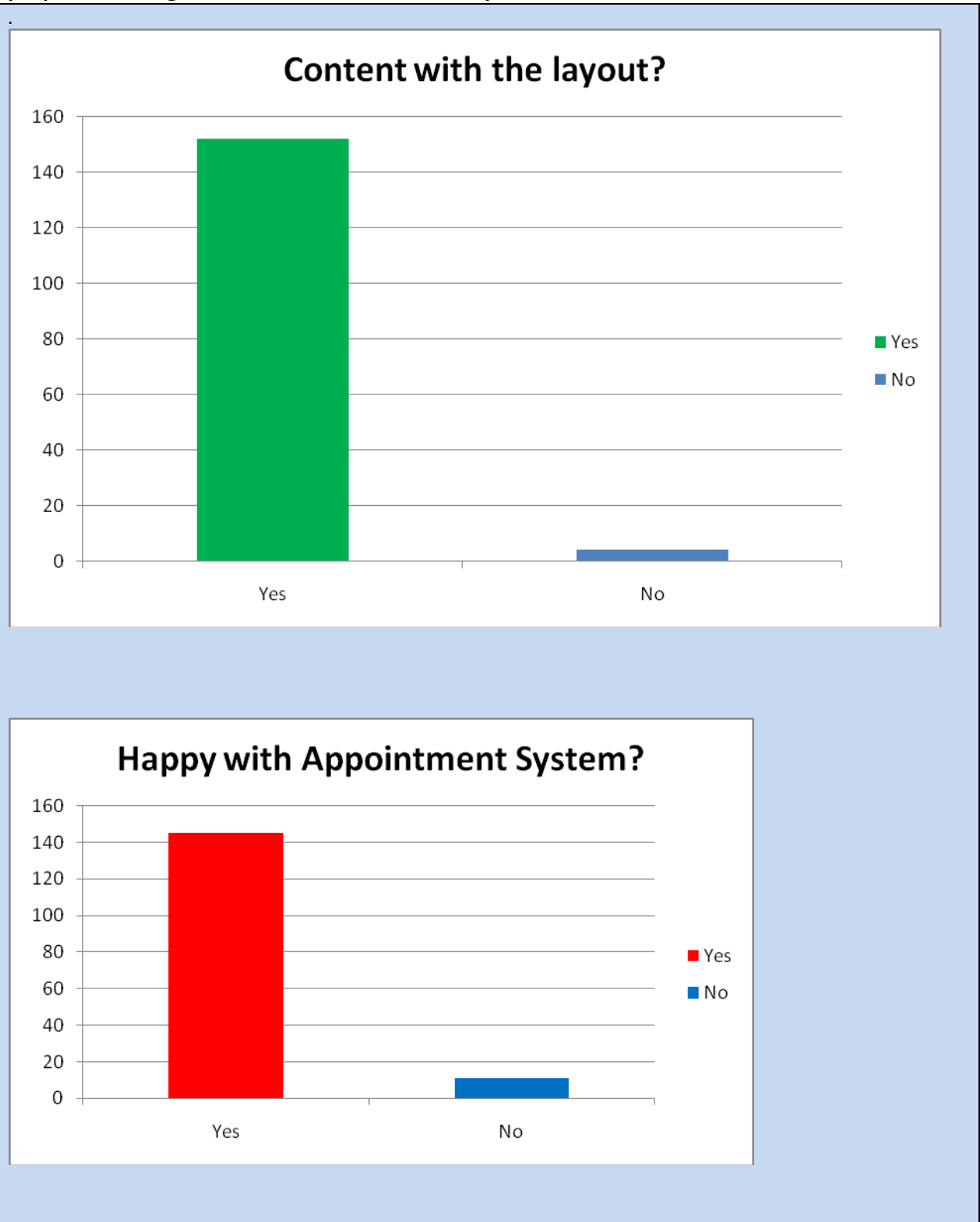
To negotiate with Physiotherapy Service

It was noted that some other suggestions from patients were for services that already exist

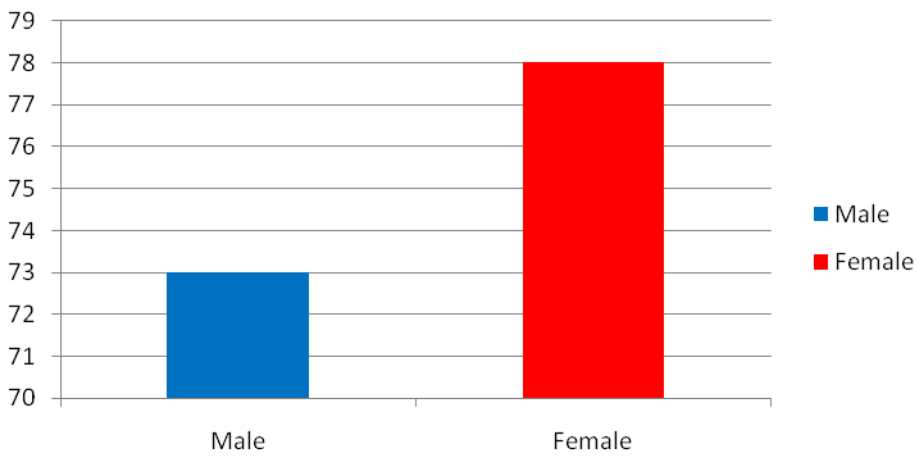
Action:-

Improve our communications and promote the services we offer more successfully.

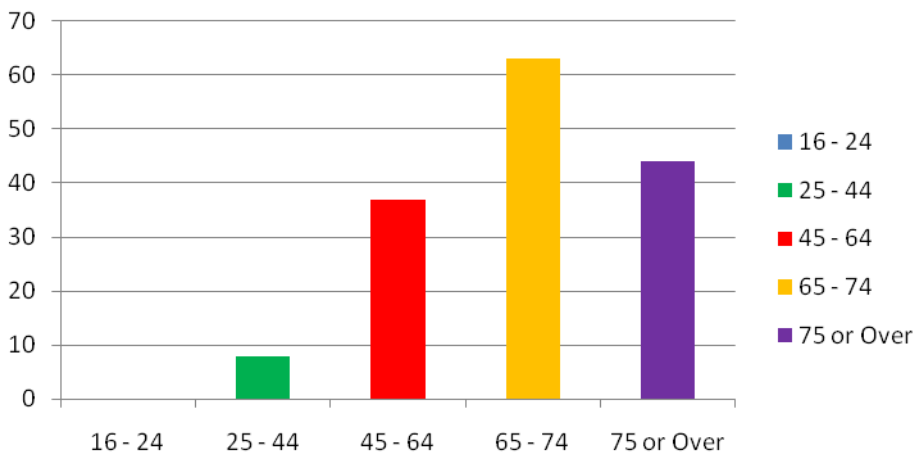
A summary of any evidence including statistical evidence relating to the findings or basis of proposals arising out to the local Practice survey:



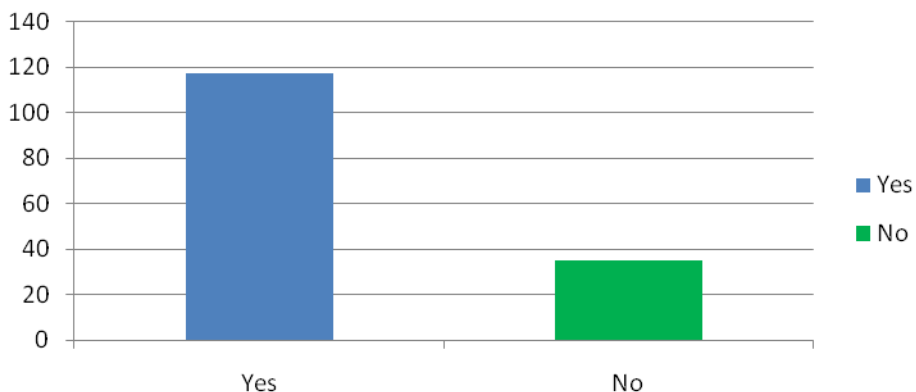
Gender



Age



Do you have a long-standing health condition?



An analysis of the Patient Survey found that nobody under the age of 25 completed a survey.

Action:-

Target the under 25 group with a new survey with questions that are relevant to their needs and in a format that will encourage them to complete the survey.

A Description of the action which the Practice, the PCT intend to take as a consequence of discussions with the PPG in respect of the results, findings and proposals arising out of the local Practice survey. If this is the second year of the scheme detail here any changes and issues since the 31st March 2012 local patient participation report was completed.

1. Written to commissioning Board re request for podiatry.
2. Discussions with Torbay Care Trust re enhanced physiotherapy provision
3. Modification to reception/waiting room to enhance privacy
4. Newsletter in course of preparation and instigate action to ensure wide distribution
5. Modification to appointment system to better reflect the needs of the patients
6. Targeted survey of the under 25's
7. Draw to the attention of the PCT the many negative comments re hospital experiences

A description of the opening hours of the Practice premises and the method of obtaining access to services through the core hours:

Wembury Surgery is open Monday to Friday 08.30 to 13.00 and 15.00 to 18.00.

The dispensary is also open at these times. Prescriptions can also be requested on line using the service available through www.wemburysurgery.co.uk

A description of any extended opening hours that the Practice has entered into and which health care professional are accessible to registered patients.

Wembury Surgery offers extended opening hours on a Thursday evening between 18.30 and 19.00

Pre bookable appointments are available with a GP and Nurse Practitioner.

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B. Document Details

Author and Role:	Sarah Williams – Practice Manager
Organisation:	Wembury Surgery
Document Reference:	PPG 2011/2012
Current Version Number:	Version 1
Current Document Approved By:	Devon PCT
Date Approved:	26 th March 2012