

Patient Participation DES | 2011-2012

Grove Medical Practice

Summary:

In 2011 the Grove Medical Practice set up two patient groups to help us improve our services.

In July 2011 we were delighted to have the first meeting of our first 'Patient Participation Group' (PPG) - a small team of dedicated patients who will work with the staff to help us improve our services. This group meets on a quarterly basis in the Grove Medical Practice.

In November 2011 we were able to set up a much larger 'Patient Reference Group' (PRG) to gain the views of a broader cross section of patients through on-line surveys.

The first survey we conducted was into how easy or difficult patients find it to use our telephone system. As a result of our findings we have made far reaching changes which we (and our patients) are confident will improve access. Amongst the changes we have implemented are changes in the appointment software we use (Jan 2012). A change in the options on the telephone system, making it simpler to use (Jan 2012). Simplified options to make it easier to book a same day appointment (Jan 2012). A change to make it easier to speak to a receptionist (Feb 2012). We are also currently developing a website through which patients will be able to book appointments. (May 2012) This was the number one request from patients with almost half putting it as their top priority.

For the full story – please read on...

Glossary:

- PPG: Patient Participation Group
- PRG: Patient Reference Group

Key objectives of the NHS Directed Enhanced Service (DES):

The purpose of the Patient Participation DES is to ensure that patients are involved in decisions about the range and quality of services provided and, over time, commissioned by their practice. It aims to encourage and reward practices for routinely asking for and acting on the views of their patients. This includes patients being involved in decisions that lead to changes to the services their practice provides or commissions, either directly or in its capacity as gatekeeper to other services. The DES aims to promote the proactive engagement of patients through the use of effective Patient Reference Groups (PRGs) and to seek views from practice patients through the use of a local practice survey. The outcomes of the engagement and the views of patients are to be published on the practice website. One aspect that practices may wish to focus on is excellent access into the practice, and also from the practice to other services in its role as coordinator of care, facilitating access to other health and social care providers... (From guidance notes...)

Implementing the PP-DES

Step 1: Develop a structure that gains the views of patients and enables the practice to obtain feedback from the practice population, e.g. a PRG

How we implemented Step 1 –

Practice Population – We looked at our practice profile through searches on our clinical system and GP knowledge of their patients.

As a practice in Shirley, Southampton we have a high percentage of Polish patients registered. Our age sex of the population is quite equally spread.

We decided that our patients and the practice would benefit from a structure that necessitated the formation of two different groups:

- A 'formal' Patient Participation Group (PPG)
For this group to function well it would require face to face meetings. We thought it might be difficult to gain good representation at this level because of time commitments but decided to try and form this group and gain their advice about the formation of a second larger PRG group that could be accessed easily through on-line surveys.
The formation of the PPG group was advertised on waiting room TV screen (though none responded so we invited a number of patients who we thought might be interested. We were delighted that most accepted our invitation.
At our first meeting we asked their advice about how best to gain a representative sample of the population to survey and we all agreed that the formation of an ad hoc Patient Reference Group (PRG) was the way to go.
- A larger 'ad hoc' Patient Reference Group
We recruited patients for this group through advertising again on the waiting room TV screen and through leaflets that were issued at the time of the flu clinics and in the waiting room, asking for updated contact details and willingness to participate in a survey. In this way we collected the email addresses of 333 people who were willing to take part in an on-line survey.
We surveyed 333 patients over the age of 16 and received 177 responses (an encouraging 53% response rate). It was broadly representative. The age of those who responded ranged from their teens to their nineties with slightly more women than men responding (59%). The greatest response was from people aged 55-64. However those for whom English is not their first language were under represented.
- We continue to publicise and collect patient email and contact details for future surveys and to join the PRG.
- When we analyzed the respondents it appeared that our sizable Polish speaking population were underrepresented. To try and increase participation from this group we translated our publicity into Polish and put slides in Polish on our waiting room screen and leaflets in the waiting room.
- This approach has met with modest success thus far but we are delighted to have a sizable group of patients who are prepared to offer their views.

Summary:

- To form PPG and PRP groups (Implemented)

Step 2: Agree areas of priority with the PRG

How we implemented Step 2 -

At our first meeting on 29th July 2011, we asked the newly formed PPG what areas they thought we should concentrate on. In a free ranging discussion they asked if there were any areas relating to access where we had received adverse comments in the past. We discussed telephone access which has been an issue in the past. Last year we had sought to improve satisfaction in this area through the introduction of an automated system called 'Patient Partner' which allows patients to book appointments out of hours through the phone system. However, we had teething problems and there were adverse comments initially. There were mixed views expressed from the group as to whether the decrease in comments represented a true increase in satisfaction – and all agreed that this would be a helpful area on which to gain feedback. We discussed expanding the scope of the questionnaire – but the advice we received was to keep the survey fairly brief to increase participation and completion rates – and help us have manageable and tangible results

Summary:

To survey issues regarding telephone access (Implemented)

Step 3: Collate patient views through the use of survey

How we implemented Step 3 -

We designed an online survey using a survey website in October 2011 – discussed it with staff and the PPG who were invited to comment and improve the survey. All suggestions were incorporated. The survey was then sent by email to all 333 patients in the PRG group in November 2011. We received an encouraging 53% response rate. The results we collated and circulated to all members of the PPG group and all the partners.

Summary:

We designed and implemented an online survey about telephone access and collated the responses (Implemented)

Step 4: Provide PRG with opportunity to discuss survey findings and reach agreement with the PRG on changes to services

How we implemented Step 4 -

We implemented this in two stages.

- Preliminary meeting with PPG on 7th December 2011 to discuss findings of survey and to seek advice about next steps. We thought that coming up with an initial plan and asking the PRG to comment and prioritise might gain best feedback.
- Initial e-mail communication with those who had been surveyed in PRG to feedback results and to ask for any further comments (29 December 2011)

Summary:

We gave both the PPG and PRG an opportunity to discuss the results of the survey. The PPG felt it would be helpful to include the following points:

- Thank patients for responding.
- Let them know we have heard the good the bad and the ugly
- 46% of people were not able to do what they wanted. We agreed this was

unacceptable. (There was a suggestion that we asked that group a further question about what it was they wanted to do – but after doing some research we found that our survey software is not able to do this.)

- 70% wanted to book via the internet. This was discussed at a partnership meeting in December and we decided to invest in a new website with facilities to book appointments.
- 60% of respondents said they would be prepared to wait longer to speak to a person
- Feedback survey results via rolling screen in reception

Step 5: Agree action plan with the PRG and seek PRG agreement to implementing changes

How implemented Step 5 -

We asked those surveyed for feedback about the survey and to evaluate our proposed changes.

We sent out a second survey to 331 people. This was read by 196 and 136 responded further .

There was overwhelming endorsement of the steps we were taking (94% positive)

We then held another meeting with the PPG on 22nd March 2012 when the report and actions taken by the Practice were approved.

Step 6: Publicise actions taken and subsequent achievement

How we implemented Step 6 -

These are the actions we have taken:

- Are developing a new web site with online booking (Go-live May-12)
- Changed our appointment software (Jan-12)
- Changed our telephone message so speaking to a receptionist is-
 - Easier
 - First option
 - Default option for most actions
- We have informed the PPG of our actions (Mar-12)
- We have publicised the changes on TV in waiting room (Feb-12)
- We have publicised the changes on our practice website and also NHS Choices
- We will also publicise the changes on the new website which is to go live in May 2012
- We will seek feedback through another survey in 9 months

Surgery Information:-

Surgery Hours

Monday to Friday 8.00am - 6.00pm

The individual Doctor's hours vary slightly. Some early and late appointments are also available.

Extended Hours

Monday 6.30pm - 8.00pm

Tuesday 7.00am - 8.00am

1st Saturday of the month 8.00am - 11.00am

How to see a Doctor

You may book an appointment by telephoning the surgery 24-hours a day on our automated system or hold to speak to a receptionist during opening hours. Telephone: (023) 8078 8500

We now offer same day appointments with our Duty team in two surgeries every day.

How to speak to a Doctor

You may book a telephone consultation by telephoning during surgery hours. Telephone: (023) 8078 3611

When the Surgery is Closed

Out of Hours cover is provided by Southampton City Primary Care Trust, before 8.00am and after 6.30pm Monday-Friday and 24-hours a day over weekends and Bank Holidays.

If you have an urgent medical problem which cannot wait until the surgery opens, please telephone the out of hours service on: 0300 300 2012

If you have a minor injury including deep cuts, sprains and minor burns please attend the **Minor Injuries Unit** at Royal South Hants Hospital is open 8.00am until 9.30 pm—365 days per year. They have x-ray facilities should this be necessary