

Local Patient Participation Report Guidance 2012/2013

Component 1 - Establish a PRG

Establish a PRG comprising only of registered patients and use best endeavours to ensure the PRG is representative

- **Description of the profile of the practice population**

There are currently 8972 registered patients at College Lane Surgery of whom 51.15% are women. The majority of patients are aged between 25 and 64 (54.45%) with the age bracket 45-54 having a greater number of patients than other Korner bands. The vast majority of patients are white British (>98%). We do not have exact figures for ethnicity because this data has been recorded for new patients but not those who have been registered for many years.

- **Description of the profile of the PRG and if the PRG is representative of the practice population**

There are 172 patients in the PRG at present – 1.92% of the total practice population. 58.72% of the patients on the PRG are aged between 25 and 64 (compared with 54.45% practice population). The age bracket 45-64 has a greater number of patients than the other Korner bands (same as practice population).

- If the group is not representative of the practice population, provide details and evidence of what attempts were made to recruit people from any underrepresented groups.

The group is considered to be broadly representative with the exception of the absence of children.

- **Age profile**

The most significant difference is the lack of any under 16's on the patient group. This group comprises 18.7% of the practice population.

- **Efforts made to recruit from under 16's**

We have continued to try and get representation from this group by targeting teenagers attending teenage clinic but have had no positive responses but for the future, we will endeavour to have some representation from under 16's on the PRG. Methods will include face to face requests at teenage clinic, flyers in the teenage clinic and we are considering exploring text messaging or social media such as a practice Facebook page where the PRG could be advertised.

All other age groups are represented on the PRG in quite similar proportions to the practice population (less than 10% difference). The age group 25-64 is the largest group in both the practice and the PRG.

- **Ethnicity**

Unfortunately we were not able to search off accurate data about all our patients' ethnicity. This data is being captured for newly registering patients but we do not have it for those who have been registered for many years. The practice has, however, a very low representation from ethnic groups other than White British. The vast majority of PRG members (97%) identified their ethnicity as White British and so the group is representative of our practice population.

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Ethnicity of the members of the PRG is as follows:

White British	167
Black British	1
Chinese	1
Not declared	3

Practice population profile No.		PRG profile No.	
Age Range			
Under 16	1763	Under 16	0
17 – 24	670	17 – 24	7
25 – 34	974	25 – 34	16
35 – 44	1238	35 – 44	24
45 – 54	1347	45 – 54	24
55 – 64	1280	55 – 64	37
65 – 74	1059	65 – 74	38
75 – 84	565	75 – 84	23
Over 84	177	Over 84	2
Total	8963	Total	172
Ethnicity			
White		White	
British Group		British Group	167
Irish		Irish	
Total		Total	167
Mixed		Mixed	
White & Black Caribbean		White & Black Caribbean	
White & Black African		White & Black African	
White & Asian		White & Asian	
Total		Total	
Asian or Asian British		Asian or Asian British	
Indian		Indian	
Pakistani		Pakistani	
Bangladeshi		Bangladeshi	
Total		Total	
Black or Black British		Black or Black British	
Caribbean		Caribbean	
African		African	1
Total		Total	1
Chinese or other ethnic group		Chinese or other ethnic group	
Chinese		Chinese	1
Any other		Any other	
Total		Total	1
Total		Total	169 (3 did not declare ethnicity)
Gender			
Male	4388	Male	68
Female	4575	Female	104
Total	8963	Total	172

- Type of group established and how many members – PRG, virtual PRG or a combination

Last year we agreed to establish both a virtual PRG and a task-focused PRG.

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The practice's initial objective was to recruit as many patients as possible to join and establish a Virtual Group - patients interested in contributing to the practice development and willing to participate in surveys, focus groups and meetings by invitation.

This has been more effective than our actions in previous years when we have had a Patient Participation Group, whose interest dwindled despite an enthusiastic start leading ultimately to disbandment of the group, a few years ago. A task focused PRG has, so far, proved to be more effective. It has the advantage of inclusivity; each time there is a new area or development we can recruit members via the Virtual group. This approach also maintains interest and enthusiasm and provides opportunities for different patients to participate. We have continued this for 2012/13.

Terms of reference for the group

The terms of reference determined by the group are as follows:

- To be an active voice for the patients of College Lane Surgery
- To publicise existing services to patients via newsletters, posters etc
- To work with the practice as it develops new services, contributing ideas
- To help the practice clinical and management team to sustain an excellent service for patients at College Lane Surgery.

Recruitment to the PRG

- How the members were recruited – what was done to promote the existence of the group and to encourage patients to join

The practice has used various methods to recruit patients including:

- All newly registered patients are invited to join the group
- There is an on-line registration form for all patients via the practice website www.collegelanesurgery.com.
- A recruitment drive with poster display in the waiting rooms of both surgeries
- Patients are told about the group in face to face consultations
- Flyers handed out in reception
- Where the practice already has a PRG, list the steps that were taken to review membership and ensure that it is representative of the practice population

As we now have a PRG, the membership was reviewed at the start of this year, compared with the practice population and was found to still be representative.

Evidence included in the appendices:

- Email invitation to join the PRG group meeting – October 2012.
- Email results March 2013.
- Recruitment form on registration to join Virtual Group.
- Waiting Room display.

Component 2 - Agree priorities and local practice survey

Agree with the PRG which issues are a priority and include these in a local practice survey

- **When were the patients' priorities discussed and agreed?**

A meeting of the patient representative group was held on Monday 8th October 2012 and there was a very useful and wide ranging discussion. The patients present felt that last year's survey had

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covered many areas of relevance very effectively and did not see the need to ask the same questions again. The patient group wished to concentrate this year on the quality of the consultation with doctors and nurses, and the services available at the practice. (Appendix Minutes).

- **Include the patients' priorities**

- (1) The quality of the consultation
- (2) The range of services available at the surgery
- (3) The website

- **Explain how an appropriate sample size was discussed and agreed with the PRG**

This was discussed. The accepted representative sample size is 25/ 1000 patients. There are currently 8963 registered patients so that a suitable sample size is: **225 patients**.

The patient group were happy with this.

The patient group agreed that questionnaires would be distributed to patients attending the surgery, attached to prescriptions for collection and made available electronically.

Evidence included in the appendices:

- Email invitation to PRG Members to join focus group
- Copies of PRG minutes
- Survey Form

Component 3 - Collate and inform findings of survey

Collate patients views through local practice survey and inform the PRG of the findings

- **Include details of the type of survey used i.e. paper, online**

The survey was printed and was also uploaded onto the practice website so that it could be filled in either by hand or electronically.

- **Explain when and how the survey was distributed to patients and what efforts were made to encourage patients to complete the survey**

The survey was distributed over a 2 week period in February to all patients attending the surgery and was attached to all prescriptions being collected during this period. The following efforts were made to ensure that patients completed the survey:

- (1) The electronic check in system was turned off, so that patients were greeted at the desk by a receptionist as they arrived for their appointment and were given a copy of the questionnaire, and a pen, and invited to complete the questionnaire after their appointment with the doctor or nurse.
- (2) The electronic display board in the waiting room was amended to indicate that the survey was taking place, to explain why and to invite patients to complete it.

- **Include details of how many questionnaires were distributed and how many completed questionnaires were returned**

In total 350 questionnaires were printed and 273 were returned – an excellent response rate of 78% (and greater than the number needed to be representative).

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- **Explain how the survey was analysed**

The survey was analysed by entering details of all the questionnaires onto an excel spread sheet. This allowed numbers to be collated and themes identified.

- **Include results of the survey**

273 completed questionnaires were received from 149 female and 89 male patients. The remaining 35 patients did not indicate their gender.

Length of registration

41 patients had been registered for less than 5 years.

40 had been registered for 5-10 years

161 had been registered for > 10 years

(Total= 242 - 31 patients did not answer this question)

Age spectrum of the patients

41 patients were aged > 19 years

147 were aged 18-59

95 were aged >60 years

Quality of the consultation

Patients were asked to rate 6 aspects of the consultation:

- overall satisfaction with this consultation
- the ability of the doctor/ nurse to really listen to you
- confidence in the ability of the doctor or nurse to explain things
- The Doctor/Nurse's consideration of the patient's personal situation
- Help with self management
- The amount of time given for this consultation

The Results

	Satisfaction	Listening	Explaining	Confidence	Personal	Self Care	time
Poor	1	2	1	0	0	0	1
Fair	7	4	3	4	8	8	11
Good	35	27	29	30	35	43	45
Very good	82	83	89	87	83	84	86
Excellent	145	153	145	149	143	133	128
Poor	0.4%	0.7%	0.4%	0.0%	0.0%	0.0%	0.4%
Fair	2.6%	1.5%	1.1%	1.5%	3.0%	3.0%	4.1%
Good	13.0%	10.0%	10.9%	11.1%	13.0%	16.0%	16.6%
Very good	30.4%	30.9%	33.3%	32.2%	30.9%	31.3%	31.7%
Excellent	53.7%	56.9%	54.3%	55.2%	53.2%	49.6%	47.2%
	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%
	1	2	1	0	0	0	1
	7	4	3	4	8	8	11
	35	27	29	30	35	43	45

Overall Outcome

For all areas, 84.1% patients rated their satisfaction with the consultation as excellent or very good.

Services for patients

The survey asked patients what they thought about the services available at the surgery and for any ideas how this could be improved. See the appendices presentation slides.

Practice website

The survey asked patients how they rated the website contents. See the appendices presentation slides.

Evidence included in the appendices:

- Copy of the practice survey and results

Component 4 - Discuss findings from survey

Provide the PRG with the opportunity to comment and discuss findings of the local practice survey. Reach agreements with the PRG of changes in provision and manner of delivery services. Where the PRG does not agree significant changes, agree these with the PCT.

- **Detail when the results of the survey were discussed with the PRG**

A meeting was held on Monday 4 March 2013 and attended by representatives of the PRG. Dr Moulton presented the finding as a powerpoint presentation and invited comments and observations from the group about survey findings and other themes.

- **Include key themes from the survey and how agreement was reached with the PRG**

Theme – the results demonstrate that the quality of the consultation is perceived to be very good by the patients. The PRG was very pleased with this (and so were clinicians). It appeared there was little that needed to be done to change here, apart from continuing with good practice.

Theme

The practice website received more ‘very good’ comments than ‘excellent

This was discussed and it was agreed that the practice would explore alternative website developers. Members of the PRG asked if there was a single standard NHS website onto which the practice could ‘paste’ its own material but LM explained that there is not. Each practice develops its own site in conjunction with software developers.

Theme

- Detail where if an agreement could not be reached, why and the action taken

Evidence to be included in the appendices:

- Copies of the minutes and survey results demonstrating when the results of the local survey were discussed with the PRG

Component 5 - Action Plan and Priorities

Agree with the PRG an action plan setting out the priorities and proposals arising out of the local practice survey. Seek PRG agreement to implement changes and where necessary inform the PCT.

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- Explain how the action plan was developed

The outcome of the survey and the Action Plan was discussed with the PRG during the course of the meeting on Monday 3 March 2013. The PRG and the practice agreed that there were some actions that could be taken straight away and that others (such as the development of a new website) would take a little longer.

Include how actions were agreed and prioritised with the PRG and reasons why any such findings or proposals should not be implemented.

Immediate actions - Agreed

- Change waiting room music.
- Purchase a clock for the waiting room.
- Inform patients that they can wait downstairs for appointments that are upstairs rather than waiting in the upstairs smaller room.
- Update the website to include more information about the doctors and staff.

Actions that will take place over the next few months - Agreed

- Set up on line booking for appointments in the new SystmOne medical system being introduced in March 2013.
- Explore a new or upgraded website for the practice.
- Complete a summary of the progress by 31 March 2013

Action Plan Summary – To publicise on the website, in the waiting rooms and email to the “Virtual PPG”. Provide copies for patients to take from reception. Agreed.

College Lane Surgery, Patient Group Survey Results Action Plan – 2012/13

You said...	We did...	The result is...
We think the waiting room music is depressing	The practice has purchased some more lively and upbeat music	The ambience in the waiting room is more cheerful
There is no clock in the waiting room so you do not know what time it is	A clock has been purchased and is on the waiting room wall	Patients without a watch can now tell what time it is
The upstairs waiting room is small and can feel claustrophobic and patients may not know that they can wait downstairs instead.	A notice is now on the walls of both the upstairs and the downstairs waiting rooms indicating that patients can choose to wait downstairs if they prefer.	Those patients who feel claustrophobic upstairs can now wait downstairs for their appointment
The practice website is not as good as it could be.	This is currently being updated and the possibility of a new site is being explored with other website providers	Work in progress
We would like to be able to book appointments on line	This will be possible with the new clinical computer system currently being installed	Work in progress

Evidence to include in the appendices

- Copy of action plan

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- Copies of the minutes/emails demonstrating where action plan was developed, agreed and prioritised with the PRG

Component 6 - Publicise the Local Participation Report and Practice Survey

Publicise the Local Patient Participation Report on the practice website and update the report on subsequent achievement.

Provide details of

- the opening hours of the practice premises and the method of obtaining access to services throughout the core hours.

The practice core opening hours are as follows; and these are published on the website and in the practice leaflet.

Monday	08.00 to 18.30
Tuesday	07.00 to 18.30*
Wednesday	07.00 to 18.30*
Thursday	08.00 to 18.30
Friday	08.00 to 18.30
Saturday (alt)	08.00 to 11.00*

- where the contractor has entered into arrangements under extended hours access scheme, the times at which individual healthcare professionals are accessible to registered patients. * See above.
- Include the URL of the website where the report is published.

www.collegelanesurgery.com

- Include details of who and how people have been informed about the availability of this report
 - Emailed to patients who have given us their email address
 - On the practice website – www.collegelanesurgery.com
 - Paper copies available to all in both surgeries

The practice will make the following people aware that the following are made aware that the report is available (and where):

- the PRG – by email
- The waiting room display will carry a message to all patients about the survey
- local LINK (HealthWatch)
- CQC - at the time of inspections/registration – will be shown the patient survey

Please note: Information on opening hours and progress on the key actions identified with the PRG, should be updated as needed in the practice leaflet and on the practice website.

Appendix

 New Patient Registration Feb 201	 PATIENT REFERENCE GROUP I	 PPG Focus Group - Oct 2012 Invite	 PPG Minutes October 2012	 COLLEGE LANE SURGERY - Patient Q	 PPG Focus Group - March 2013 Invite
 MINUTES OF PATIENT REFERENCE					