

The Rowans Surgery Patient Participation Group Report 2014-2015

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Development of the Patient Participation Group (PPG)

The group was established in 2012 by our previous Practice Manager and we have continued to meet annually and engage via post or email.

The Patient Participation Group Profile - 2014/2015.

The group is led by Dawn Defontaine, Practice Manager supported by Alex Faircloth, General Administrator and Digna Saldanha, Senior Receptionist.

The PPG consists of 27 patient members, a decrease of 9 against 2013/2014.

As well as the 34 members, all patients are welcome to attend to speak to the Partners and the Practice Manager about their concerns. The Rowans Surgery Patient Participation Meetings are widely advertised and all registered patients are welcome to attend.

We meet annually to discuss the progress of the practice and to gain insight into the views of our patient population.

Equality and Diversity

The practice recognises the importance of ensuring the PPG is representative of our patient population. Below are the basic analyses of the PPG and an outline of the actions that were taken to make the PPG more representative.

Gender

The practice population is currently 9130 patients.

48.52% are male and 51.48% are female.

The PPG is currently 29% male and 71% female. We have been actively recruiting more male participants to balance the group however the male population remain under-represented.

Age

Despite our efforts to engage patients in the under represented age groups from last year there has not been much improvement year on year. Patients aged between 55-84 years make up the majority of our group. Our existing members suggested that we organise an egroup for patients who are unable to attend practice meetings as this may attract patients from the younger demographics. We will continue to work on this is future.

Ethnicity

The Practices and PPG ethnicity mix has not altered significantly in the previous 12 months

The "White British" group is still over-represented and "Other White" is under represented. We feel that most other ethnic groups are reasonably well represented and due to the diverse ethnicity of our patient population it is not possible to be truly representative of all ethnic groups without a much larger PPG.

Patients with Disabilities

As part of our Equal Opportunities policy, when inviting patients, clinicians ensure that they included disabled patients as well. This is a sensitive issue that we decided should be addressed by clinicians who would be able to better understand the patients' capabilities. This minimises the risk of patients unable to be part of the group being invited by letter or email.

We currently have 1 member of the PPG who has a disability.

Carers

There are 165 carers registered at The Rowans Surgery. This represents less than 2% of the practice population. The practice actively invites carers to join the PPG and there are 2 carers in our existing group.

Engagement with the Patient Participation Group

We currently engage with existing members via the annual Practice meeting and through written correspondence. In 2015/2016 we hope to reach more patients with the implementation of an e-group. This will allow the core group to collect information from a wider source through online surveys and provide a method of communication for patients who would like to participate but are unable to attend meetings at the practice e.g Carers, patients with disabilities, working patients.

Recruitment of new members has been the main focus for the practice this year. We have implemented new registration forms for the group which are available in reception and for download from our website. We will be consulting our local Healthwatch service on ways to recruit younger members as they are not represented at all at the moment.

Feedback

We felt it was important to gain a balanced view of patient feedback so we reviewed feedback from a number of sources. We used NHS Choices, FFT and practice feedback forms which are accessible in the practice and online.

The Practice Manager reviewed these on a case by case basis, reporting trends to the Partners.

From these trends the three priority areas were identified and an improvement plan was put together.

Key Priorities

1. The Duty Doctor Service was identified as a key area for improvement.

Patients were frustrated at long waiting times and being asked to call back while the Duty Doctor had a heavy workload to tackle in the afternoon which limited the number of patients which could be dealt with and resulted in asking patients to call back while they dealt with emergencies or requests for information from external providers such as Social Services or Secondary Care.

The Partners agreed to trial an Admin Doctor in the afternoon 4 days per week and opening up more availability on the morning when an afternoon session is not possible. The Admin Doctor will manage the administrative tasks such as urgent prescription requests and medication queries which enables the Duty Doctor to deal with patients with symptoms of illness. This also reduces the demand for pre-bookable appointments as an increased number of patients can be dealt with on the day.

The Patient Participation Group approved of the Admin Doctor. The majority had positive experiences of the Duty Doctor but were unaware of the workload they undertake. We will continue to update our PPG with the progress of the Admin Doctor in coming months via our PPG meeting.

2. The telephone system was identified as a priority area at the end of last year as a result of the annual patient survey.

Patients expressed concerns about lost connections, long waiting times and engaged tones at peak times.

The Practice is investing in a new telephone system in March 2015. The new system will enable a queuing system whereby patients will be informed of their position in the queue

and the average waiting time. There is also the facility to record health promotion messages while patients are waiting such as 'flu clinic information. The Patient participation Group has been encouraged to provide feedback of their experiences directly to the practice manager once the new system is installed.

3. Patient Service

In a service driven society we felt that Patient Service was a key priority area for improvement with a focus on customer service. This was also raised as an area for potential development during the 2013/2014 patient survey.

In the last 12 months we have simplified the registration process for patients wishing to join the practice and invite them to a new patient health check by appointment with our Health Care Assistant. We have also reviewed our staff's training needs and they are due to undertake Equality and Diversity training as well as Customer service training organised by Merton Clinical Commissioning Group focussing on conflict resolution and treating patients with empathy.

As this is an ongoing area of development for the practice it was agreed that improvement would be measured using ongoing feedback from NHS choices and the Friend's and Family Test.

Upon review of the 2013/2014 patient survey, **appointment availability** was an area of concern and still arises in the patient feedback forms. We are contracted to provide 650 GP appointments per week, we currently provide on average 837 per week. This includes telephone appointments and we expect to see a rise in the number of patients requesting consultations in this way as it is most convenient for them. This winter we utilised the Winter Resilience Funding from Merton Clinical Commissioning Group to provide an additional 36 appointments per week for patients aged 18 years and under. Patients were made aware of these appointments via our practice website and notifications in the practice. This scheme started in December 2014 and is due to end April 2015. This has been well received by patients and has meant that some parents who would have attended A&E with a sick child have had their child seen in the practice instead.

To assist with access to appointments we have also been promoting **Vision Online Services** and have registered 3000 patients in the last 12 months. Patients are now able to book a 10 minute appointment up to four weeks in advance online. Patients can also request repeat prescriptions online and can apply for access to their summary information. We encourage members of our PPG to trial Vision Online Access to Summary Information first to provide constructive feedback before the service is rolled out to the rest of our patients on 31st March 2015.

Patients aged 75 years and older have been a priority area for us this year. We have provided an extra four sessions per week dedicated to improving care for patients in this age group. They were first priority for 'flu vaccinations along with housebound patients and patients in care and nursing homes. This group of patients annual reviews for chronic conditions were completed earlier this year. We also offered patients without known chronic conditions an over 75 health check including assessments for problems with hearing and sight, a falls risk assessment and offered dementia screening. This helped to identify patients who may not necessarily present at the surgery with an ongoing problem.

Monitoring of the Key Priorities

Progress of the actions taken will be published on our practice website in coming months via a "you said, we did" format. This will also be displayed in the practice waiting room and be updated quarterly based on the actions put forward by the PPG.

This report as well as the presentation for our last Patient Participation meeting held on 4th March 2014 is available to view on our practice website from 31st March 2015.

