

## LOCAL PATIENT PARTICIPATION REPORT

### NORTH PETHERTON SURGERY 2013-14

#### 1. A description of the profile of the members of the PRG

- \* For example the age, sex and ethnicity profile of the Provider's population and the PRG.

(Component 1)

The practice now has 5280 patients - 2648 females and 2636 males. Historically our patient list has been predominantly white British and a more elderly population. Due to the new Stockmoor and Wilstock Village developments we are seeing an increasing number of younger families. Only 0.03% of our population are outside of the white British ethnic category, these consisting mainly of workers at the local Indian and Chinese restaurants and some fruit pickers during summer months.

Our patient group numbers have fluctuated throughout the past year but up to eight members have represented the group at different times during the year – 4 male and 4 female. (We also have two practice members). They are all white British, one is a registered carer and also the practice Carer's Champion; they fall into at least five of the long term condition indicators. Excluding staff members, their age range represents around 0.53% of the practice population.

#### 2. Steps taken by the Provider to ensure that the PRG is representative of its registered patients and where a category of patients is not represented, the steps the Provider took in an attempt to engage that category

- \* The variations between Provider population and PRG members
- \* How has the Provider tried to reach those groups not represented?

(Component 1)

We have continued our campaign to involve more patients in the PPG, especially families moving to the new estates. We have set up, via the website, a virtual group so that patients unable to come to meetings may have more involvement in the group.

Posters are situated on the surgery notice board advising how to access the group and relevant meeting dates. We have had specific fliers printed so that they may be left in local places e.g. library, thus advertising the group to other patients who may not attend the surgery on a regular basis.

We have a new practice brochure that has a page dedicated to the PPG with contact names and e mail addresses.

This is available to all patients but specifically handed out to new patients together with the registration form when they come to register here.

We have placed information in the local Parish magazine which is delivered to all outlying parishes in the Diocese, with the hope that patients may be interested in joining either group.

The Chair has been pro-active and regularly attended the Somerset PPG Chair meetings and development days in order to both network and learn of best practice and development within other PPG groups. He has also been in discussion with the Vicar in trying to set up a befriending group involving PPG members. Additionally the PPG has been represented at regular meetings of the Bridgwater Bay Health Federation PPG Network meetings.

This year we are moving our meetings to the evening thus hoping to capture those new to the area and who are at work during the day, but who would be keen on coming along. Dates and times can be found on the practice website and are advertised within the Surgery.

We are still members of NAPP and try to implement any ideas they publish with a view to generating more interest in the group. Our membership followed from the Chair's attendance at the Annual Napp conference, held in Bristol. We also held a drop-in event in the local Community Centre during National Patient Participation week to both encourage involvement in the PPG and in an attempt to boost membership.

### **3. Details of the steps taken to determine and reach agreement on the issues which had priority and were included in the local patient survey**

- \* How were the priorities identified and agreed?

(Component 2)

The group viewed last year's survey and agreed that another survey should be implemented this year along the same lines but with less ambiguous questions. It was agreed that we would again sample a random selection of 100 patients. Most of last year's issues had been fairly easy to deal with and Community Support is on-going with the group liaising with the Vicar (befriending group) the Connect group and the Compass Carer's group.

### **4. The manner in which the Provider sought to obtain the views of its registered patients**

- \* What methodology was used to agree the questions, the frequency, the sample size, distribution methods to ensure the views of all patient are represented and undertake the survey?

(Component 3)

The questions from last year's survey were dissected and those deemed appropriate were used again this year together with some questions less ambiguous than before. The questions were perused by the group and by the members of the Surgery and it was agreed that the survey should be sent to a random selection of 100 patients. In hindsight it was agreed that next year's survey should be sent to 10% of the practice list. A search was produced from Emis Web and the surveys sent, removing those deemed inappropriate e.g. patients in care homes.

From this sample, disappointingly only 40 were returned despite a stamped addressed envelope being enclosed.

**5. Details of the steps taken by the Provider to provide an opportunity for the PRG to discuss the contents of the action plan in Section 7 (of this template)**

- \* How was the PRG involved in agreeing the action plan?
  - \* Were there any areas of disagreement, and if so how were these resolved?
- (Component 4)

A meeting was held with the PPG group to discuss the findings of the survey. It was disappointing that only 40% were returned despite the group maintaining a higher profile during the past year. There were no areas of disagreement within the group with regard to the action plan. Everyone is committed to enhancing the work undertaken by both the practice and the PPG.

**6. A summary of the evidence including any statistical evidence relating to the findings or basis of proposals arising out of the local patient survey**  
(Component 4)

**Opening hours and available appointments.** 71% of respondents were aware of surgery opening hours. (Opening hours are advertised at the practice, in the practice booklet and on the website.) 81% agreed that appointments were available around work and other commitments. A good response was received with regard to getting an appropriate appointment when necessary. 60% were able to get an appointment with the Dr or nurse of their choice. 50% of those surveyed had been offered a telephone consultation either with a Dr or nurse but not significant as this may not have been an appropriate alternative. The majority of those surveyed had not sought advice from either the local pharmacist or NHS Direct before seeking an appointment.

**Privacy**

Only one patient remarked on the potential lack of privacy whilst speaking with the reception staff. A private room is available should this be required and a notice to this effect is on the surgery notice board.

**Health Education**

60% of those surveyed were not interested in any health education workshops. However this is something we intend to start holding over the summer months using suggestions made by those who were interested – weight loss/menopause/diet etc

**Community support**

79% said they were not aware of community services. It is hard to establish whether the patients surveyed would have needed to access these services. This is an on-going priority within the group and we will continue to be proactive within North Petherton and the surrounding areas.

### **Website**

68% said they were unaware of the surgery website. (See 7 below.) This led to 87% of those surveyed not being aware that they could order prescriptions and book appointments online. We are holding an active campaign within the surgery advertising the website as well as the ongoing actions stated below.

As a bonus, 5 patients surveyed have said they would be like more information on the group with a view to joining the PPG. Going forward this is good news for developing and increasing the profile of the group.

**7. Details of the action plan setting out how the finding or proposals arising out of the local patient survey can be implemented and, if appropriate, reasons why any such findings or proposals should not be implemented. Include details of the action which the Provider,**

- **and, if relevant, the PCT, intend to take as a consequence of discussions with the PRG in respect of the results, findings and proposals arising out of the local patient survey**
- **where it has participated in the Scheme for the year, or any part thereof, ending 31 March 2012, has taken on issues and priorities as set out in the Local Patient Participation Report**

(Component 5)

<b>Findings / Proposals or PRG Priority Areas</b>  <i>'You said...'</i>	<b>Action to be taken</b> (if no action is to be taken provide appropriate reason)  <i>'We did...'</i>	<b>Lead</b>	<b>Timescale</b>	<b>Progress</b>  <i>'The outcome was...'</i>
2014 survey. "We were not aware the surgery had a website 68%"	Surprisingly high considering the web address is on every letterhead, on the surgery notice board in the waiting room, on every surgery brochure and online access is advertised widely within the reception/waiting room area together with the website address. Following on from this, 87% were not aware they could order prescriptions and book appointments on line	PM	Immediate	Ongoing. We are unsure how we can be more proactive with regard to this. We will implement everything we can think of to ensure the website becomes more widely known.
2014 survey. "40% of those surveyed had not been given an explanation if	Ensure reception staff are on the ball with who is in the waiting room and how long	PM	Immediate	Reception meeting called to advise reception staff of this issue. PM will monitor

waiting more than 15 minutes after their appointment time”	they have been sitting there.			sessions and ensure patients have been given an explanation. Poster on reception window notifying patients to come to the desk if they have been kept waiting. We are keeping a “tick box” survey to monitor this.

**8. The opening hours of the practice premises and the method of obtaining access to services throughout the core hours.**

- \* Please provide details of the Practice opening hours and how patients are able to make appointments/access services or provide a link to the relevant page(s) of the Practice website where this information can be found

The practice is open from 8.00 am every morning Monday – Friday. Until 8.00 pm Monday evenings and 6.30pm Tuesday – Friday evenings inclusive. Alternate Saturday mornings from 9.00am to 10.30 am. Telephone lines are open from 8.00am – 6.30 pm Monday – Friday and after these hours are answered by the Out of Hours service.

Patients can make appointments and order prescriptions by telephone, fax, e mail, post or in person. The practice is now offering online access to patients to make appointments; both with GP's and the practice nurse for routine blood tests; order repeat prescriptions and to amend personal details. Patients can be provided with passwords for this either in person at the practice or via the link on the website. We try to keep the website as up to date and informative as possible.

**9. Where the Provider has entered into arrangements under an extended hours access scheme, the times at which individual healthcare professionals are accessible to registered patients.**

- \* If providing, please confirm details of the extended opening hours provided by the Practice or provide a link to the relevant page(s) of the Practice website where this information can be found

See above for surgery opening times. Clinicians are available to patients throughout these opening times. The dispensary is also open for the collection and ordering of prescriptions. We do not close at any point during the day.

**Date Report Published:** .....28<sup>th</sup> March  
2014.....

**Web Address of Published Report:**

.....www.northpethertonsurgery.com.....  
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Please publish your Practice Participation Report (plus any appendixes) on your practice website by no later than 31 March 2014 and ensure that a copy is also emailed to the Area Team to [england.bnsssg-gmspms@nhs.net](mailto:england.bnsssg-gmspms@nhs.net) by the same date.