

PATIENT REPRESENTATIVE GROUP REPORT – MARCH 2014

PATIENT REPRESENTATIVE GROUP

WHAT IS THE PATIENT REPRESENTATIVE GROUP (PRG)?

The patients representative group at FirstCare practice was set up in 2008 to understand the views and opinions of the patients on the services and care provided by the practice. The group consists of volunteer patients who meet quarterly with the medical and management staff of the practice. The group reviews everything from access to the services, to local health needs, to the effect of the changes in the NHS on the practice. It is an open membership group that encourages involvement and attendance from all areas of the practice community'

The group is fully supported by the GP's and the management, Dr Rahman, Lead GP and the Practice manager attend every meeting.

Purpose and Aims of the Group –

- *The group aims at providing constructive, sensitive support for the practice team, ensuring patients needs are met through two way communication.*
- *The group reviews everything from high priority issues such as access, appointments system, clinical care, staff attitude, services, to any new services at the practice, changes in the NHS.*
- *The group seeks to mirror the professional standards of the practice while reflecting the realities of patients needs and communication methods.*
- *The ultimate aim is to act as the “voice of patients”, reflecting local views and opinions and thereby supporting the practice team in developing services for the registered patients.*

The group is open to all patients at the practice and we encourage patients to join the group and be a part of the team.

PRG AND PRACTICE PROFILE

Demonstrating how a Patient Reference Group is Representative				
Practice Population Profile		PRG Profile		Difference
Age				
% Under 16	28.2	% Under 16	0	30.21
% 17-24	12.8	% 17-24	0	12.8

% 25-34	20	% 25-34	0	20
% 35-44	13.7	% 35-44	42.8	29.1
% 45-54	8.9	% 45-54	0	8.9
% 55-64	7.4	% 55-64	0	7.44
% 65-74	3.0	% 65-74	42.8	37.2
% 75-84	2.6	% 75-84	14.2	11.6
% 85 and Over	0.64	% 85 and Over	0	0.64
Ethnicity				
White		White		
% British Group	1	% British Group	0	1%
% Irish	0.08	% Irish	0	0.08%
Mixed		Mixed		
% White & Black Caribbean	0.23	% White & Black Caribbean	0	0.23%
% White & Black African	0.1	% White & Black African	0	0.1%
% White & Asian	0	% White & Asian	0	0
Asian or Asian British		Asian or Asian British		
% Indian	5.2	% Indian	28.5	23%
% Pakistani	63	% Pakistani	57	6%
% Bangladeshi	13.2	% Bangladeshi	0	13.2%
% Arab	10.4	% Arab	0	10.4%
Black or Black British		Black or Black British		
% Caribbean	0.71	% Caribbean	0	0.71%
% African	2.4	% African	0	2.4%
Chinese or other ethnic group		Chinese or other ethnic group		
% Chinese	0.8	% Chinese	14.2	13.4%
Not Stated %	5.8%	Not Stated %	0	5.8%
Gender				

% Male	57.2	% Male	57.1	0.1%
% Female	45.4	% Female	42.8	2.6%

STEPS TO ENSURE GROUP WAS REPRESENTATIVE/REASONS FOR DIFFERENCE IN GROUP AND PRACTICE PROFILE

The Practice Manager completed an audit on the practice's patient ethnic profile. The main ethnic groups identified were Pakistani, followed by Bangladeshi. The practice has identified quite a few minority ethnic groups of patients. The practice has advertised in several ways:

- **Posters** - We have had posters up in the waiting areas advertising the group. The main poster has been in English advising patients that we have a group and how to join it and also covering the ethos of the group.
- **News letters** - We have used practice newsletters to advertise and promote the patient participation group. These were sent with all repeat prescriptions. These are available at the front desk.
- **Envisage Waiting area Information Screen** - We have also advertised on the Envisage screen in the waiting area. There is a poster displayed on the envisage screen advertising the patient participation group and asking patients to join the group.
- **Practice website** - Our practice website has a separate patient participation group section with names of the current members of the group, aims and objectives of the group and how to join the group.
- **Inviting patients opportunistically** – Practice manager, GP's and Reception staff have been verbally inviting patients to join the group. Staff have been speaking to patients in general and perhaps who are either happy or unhappy with our service or also those who have contacted the team for other reasons. One of the Arabic speaking Drs at the practice has been discussing and encouraging Arabic patients to join the group. Our Bengali speaking receptionist has been encouraging and advertising the group among the Bangladeshi patients.

PRG FREQUENCY

The patient participation group meets quarterly with the management and medical staff at the practice. The practice manager personally calls and invites all the patients. Please see below details of the meetings held last year.

<i>Dates Of Meeting</i>	<i>Agenda Items Discussed</i>
<ul style="list-style-type: none"> • 06.06.2013 	<ul style="list-style-type: none"> • <i>Review Telephone access</i> • <i>Feedback on the new telephone system.</i> • <i>Feedback and discussion about access and appointments system at the practice.</i> • <i>Introduction of new practice nurse at the practice.</i> • <i>Recruiting more patients for the PRG</i>
<ul style="list-style-type: none"> • 12.09.2013 	<ul style="list-style-type: none"> • <i>Recruiting more patients for the PRG</i> • <i>Feedback on current access and appointments availability.</i> • <i>Educating the patients about surgery/telephone busy times wherever possible.</i> • <i>Discussion about reception staff being more accommodating when booking appointments by accommodating patients within 48 hours to see GP.</i> • <i>New online prescription ordering service.</i> • <i>Update from the Commissioning Group</i>
<ul style="list-style-type: none"> • 21.01.2014 	<ul style="list-style-type: none"> • <i>Recruiting new members for the group</i> • <i>Feedback on access, appointments system and telephone system.</i> • <i>Educating the patients about booking pre-book appointments for non urgent/routine matters.</i> • <i>Review of patient complaints regarding access. Feedback from the group, their views on appointments availability.</i> • <i>Discussion about rude and abusive patients</i> • <i>In house patient satisfaction surveys – discussion on priority areas and questionnaire to be used this year.</i>
<ul style="list-style-type: none"> • 18.03.2014 	<ul style="list-style-type: none"> • <i>Discussion/analysis of the GPAQ survey results.</i> • <i>Points of action discussed and action plan agreed</i> • <i>Discussion about access and appointments system at the practice.</i> • <i>Role of reception staff and senior staff in dealing with patients concerns about appointments and making patients feel satisfied.</i>

PRG MEMBERSHIP

The following are the names of the members of our patient participation group currently

Chair-Dr S Rahman

Vice Chair-Ikber kaur, Practice Manager

Practice Nurse

Mr Haleem Khan-Patient

Mr Abdul Rashid-Patient

Mr Jhitateja Singh-Patient

Mrs Yesmean Akhtar – Patient

Mrs Shamim Akhtar – Patient

Mr Yim Kwok – Patient

Mrs Aisha Khan - Patient

PATIENT SURVEY

AREAS OF PRIORITY & HOW THEY WERE DECIDED

- *In the meeting on 21.01.2014 the PRG members agreed to use the same GPAQ questionnaire as last year.*
- *The PRG agreed that the GPAQ questionnaire includes priority issues like appointments availability, telephone access, waiting times, staff attitude etc.*

Description of the survey

- *In the meeting on 21.01.2014 we presented a sample GPAQ survey questionnaire to the members. GPAQ survey was agreed upon and was used last year as well. The PRG members were all familiar with the questionnaire.*
- *There were no concerns raised and the PPG unanimously supported the use of the GPAQ within the Practice, as it includes the priority areas discussed earlier and it is a widely used survey. The same questionnaire was used in the previous years as well.*
- *The survey has a total of 18 questions and also has a section for comments where patients can comment on anything good about the practice or anything they would like to improve or general comments.*
- *The practice uses this survey every year.*
- *The PPG acknowledged that GPAQ is a good survey tool and feedback in any form is good and useful for the practice.*

SURVEY PROCESS

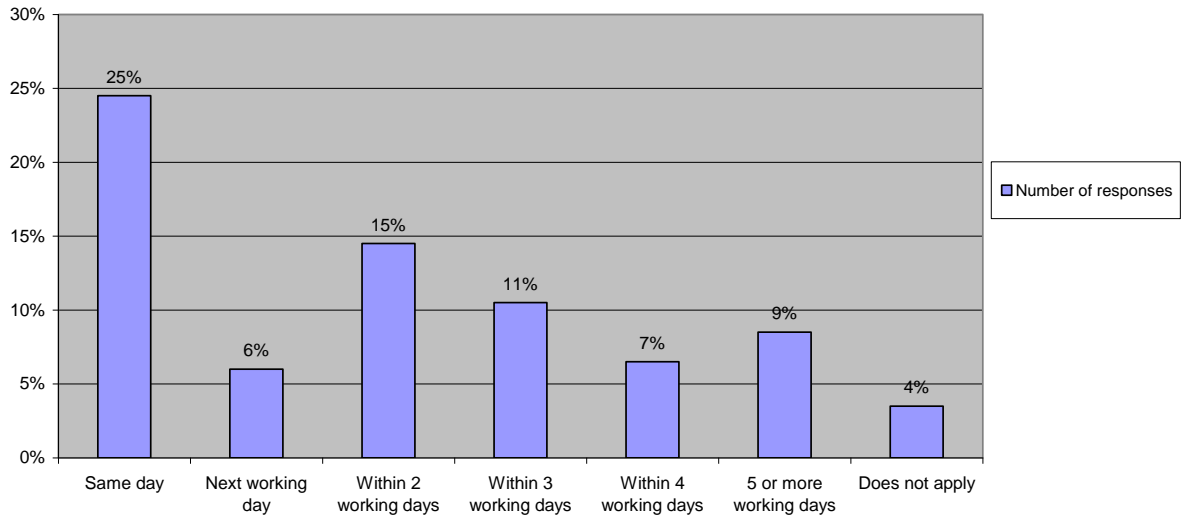
- *Patients were asked upon arrival to the surgery if they would be happy to participate in the practice survey. The Practice looked at targeting various groups of patients and different times of the day (baby clinic, chronic disease clinics, and general routine appointments with GP's.)*
- *The survey was conducted during February/March 2014. The practice manager ensured that the survey was completed throughout the entire week, including extended hours and while each member of the team was working to ensure that there was a fair reflection of the entire team.*
- *The surveys were distributed throughout the entire day to include those attending extended hours. The receptionists used their current skills to engage all the patients, so they asked all patients and were not selective.*
- *50 questionnaires per GP were completed. A total of 150 questionnaires were completed.*
- *For non-english reading patients there was a receptionist available to interpret.*

RESULTS

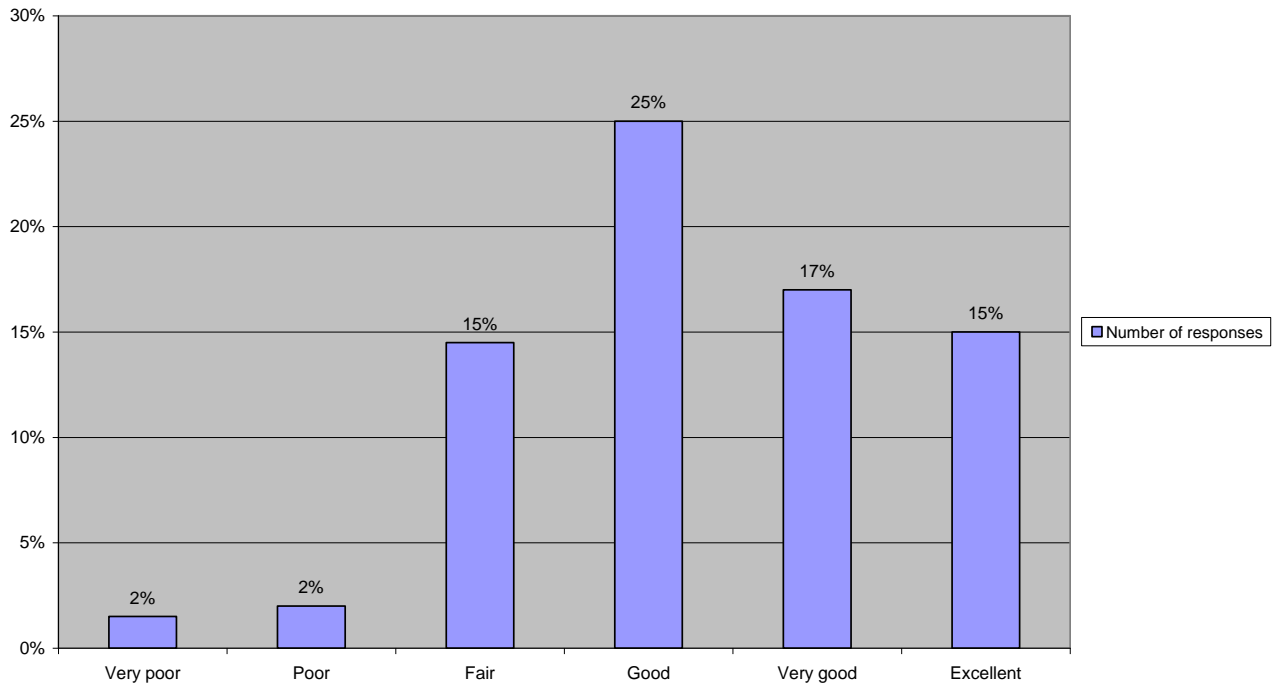
The Practice Manager collated the responses and final report was produced. The report involved an analysis of the survey findings pinpointing the areas where the practice had scored well and also the areas where improvement might be needed. The report detailed the survey results using bar graphs to aid the practice in understanding the results.

Of the 150 completed questionnaires, the findings are as follows:

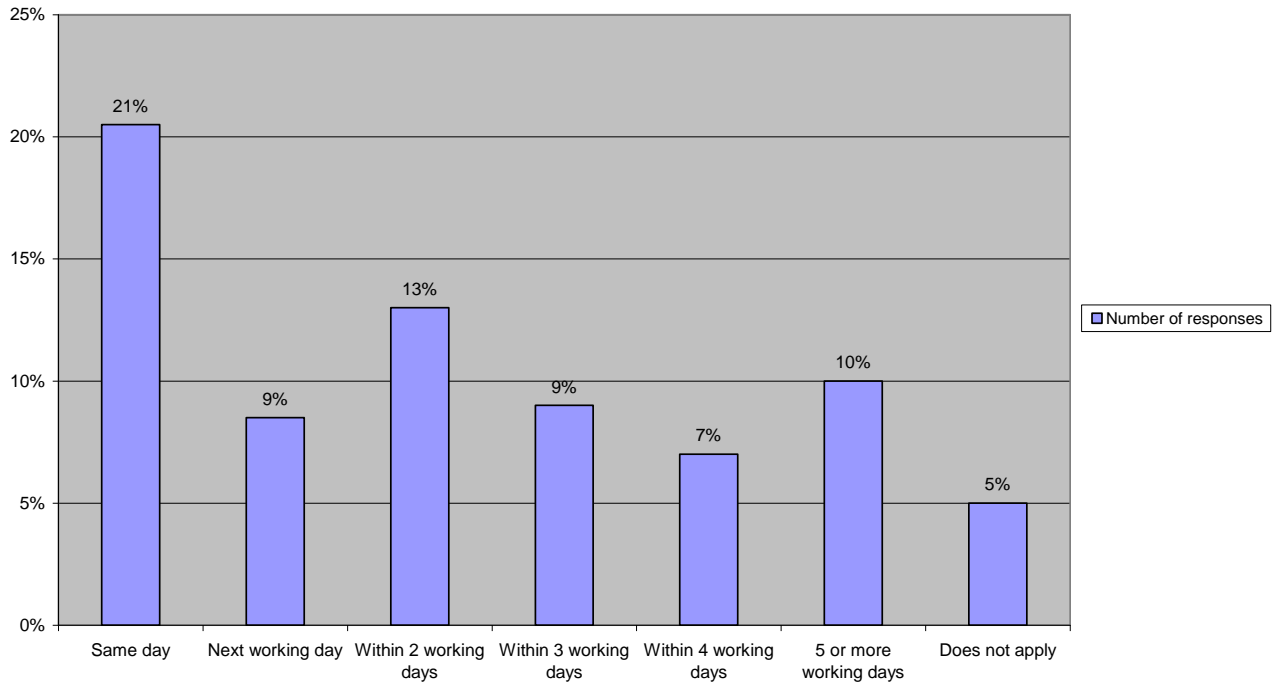
Question: Thinking of times when you are willing to see any doctor, how quickly do you usually get seen?



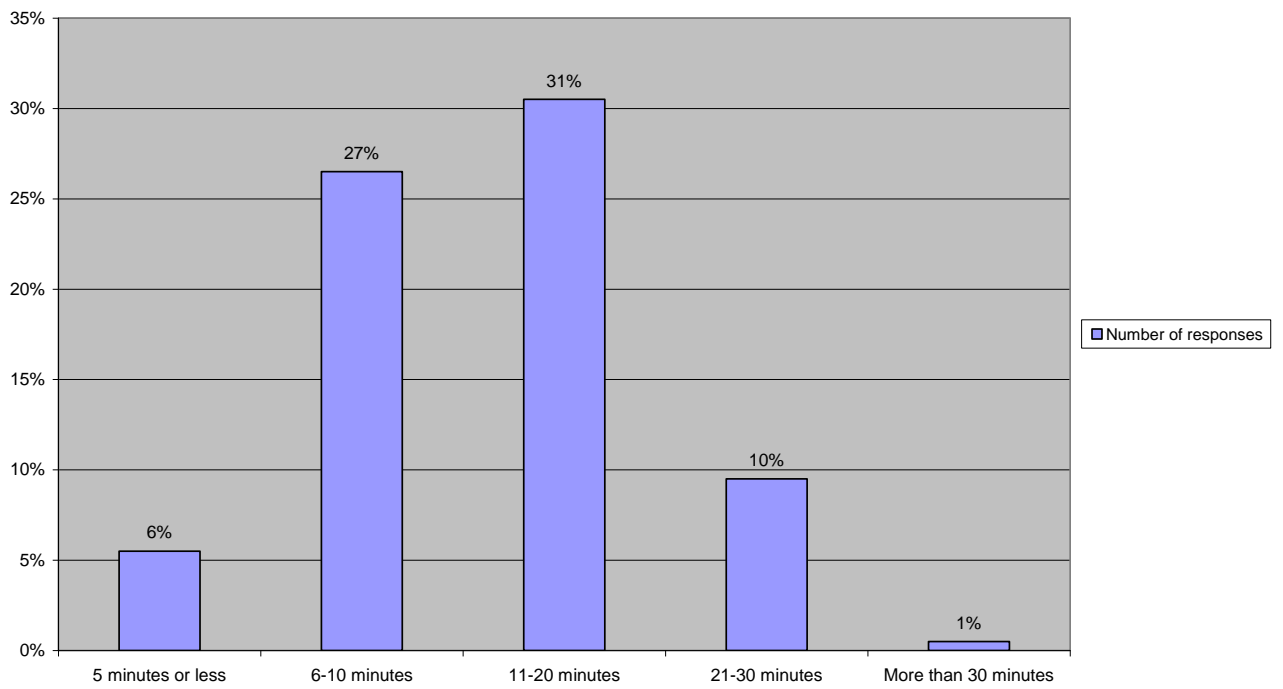
Question: How do you rate the hours that your practice is open for appointments?



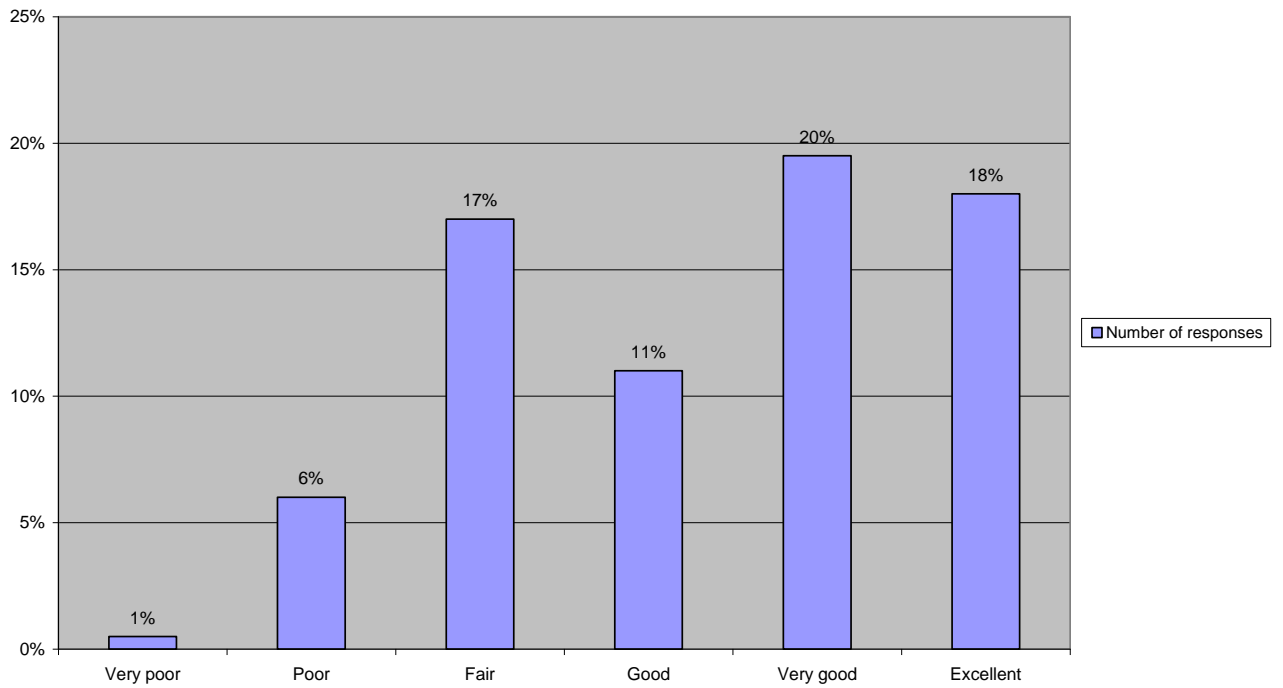
Question: Thinking of times when you want to see a particular doctor, how quickly do you usually get to see that doctor?



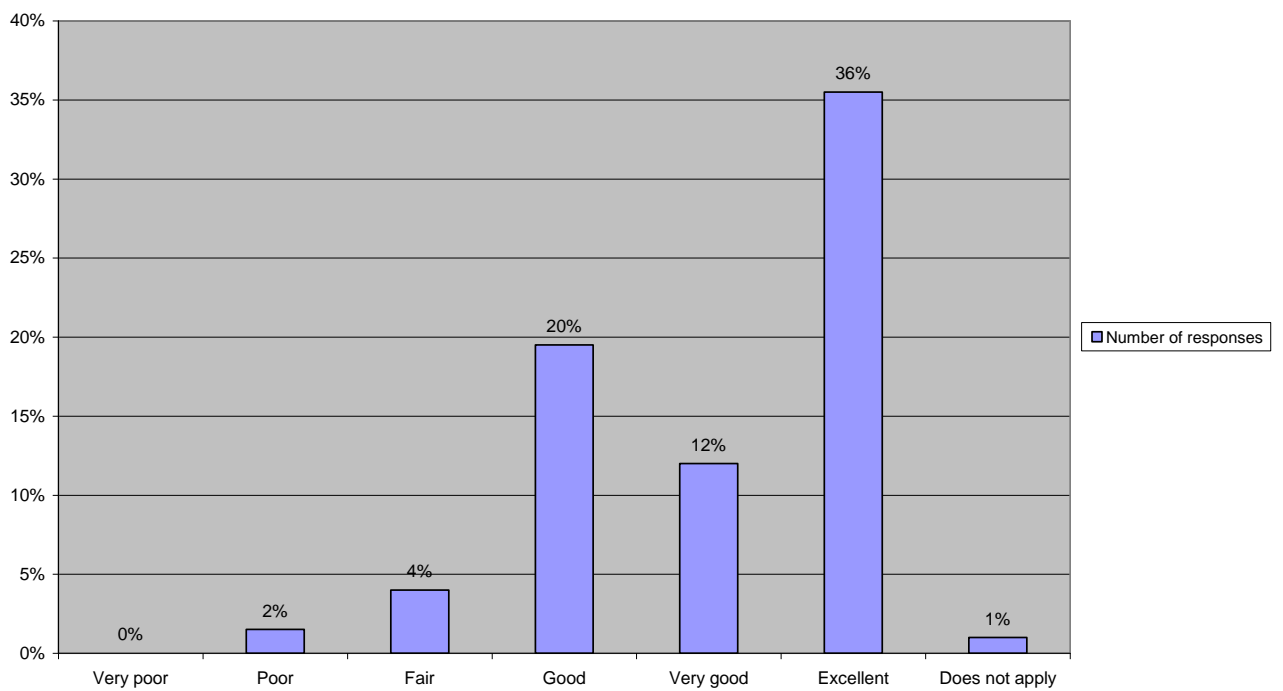
Question: How long do you usually have to wait at the practice for your consultations to begin?



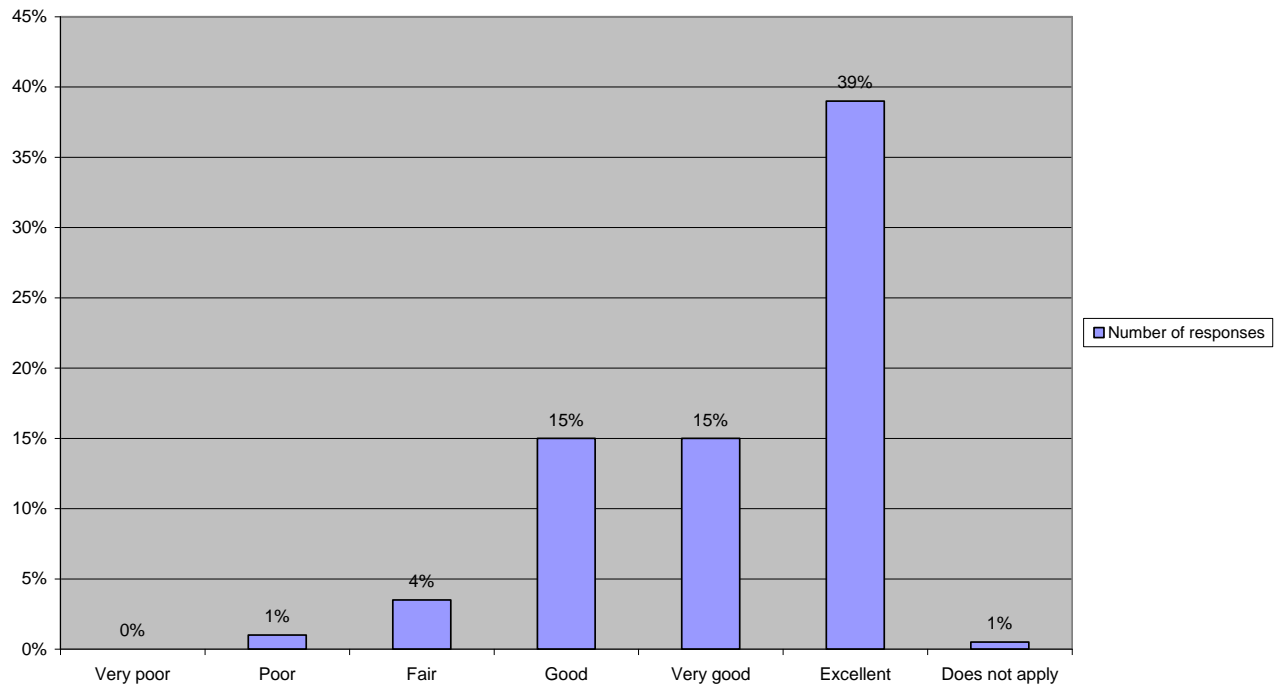
Question: How do you rate the waiting times at the practice?



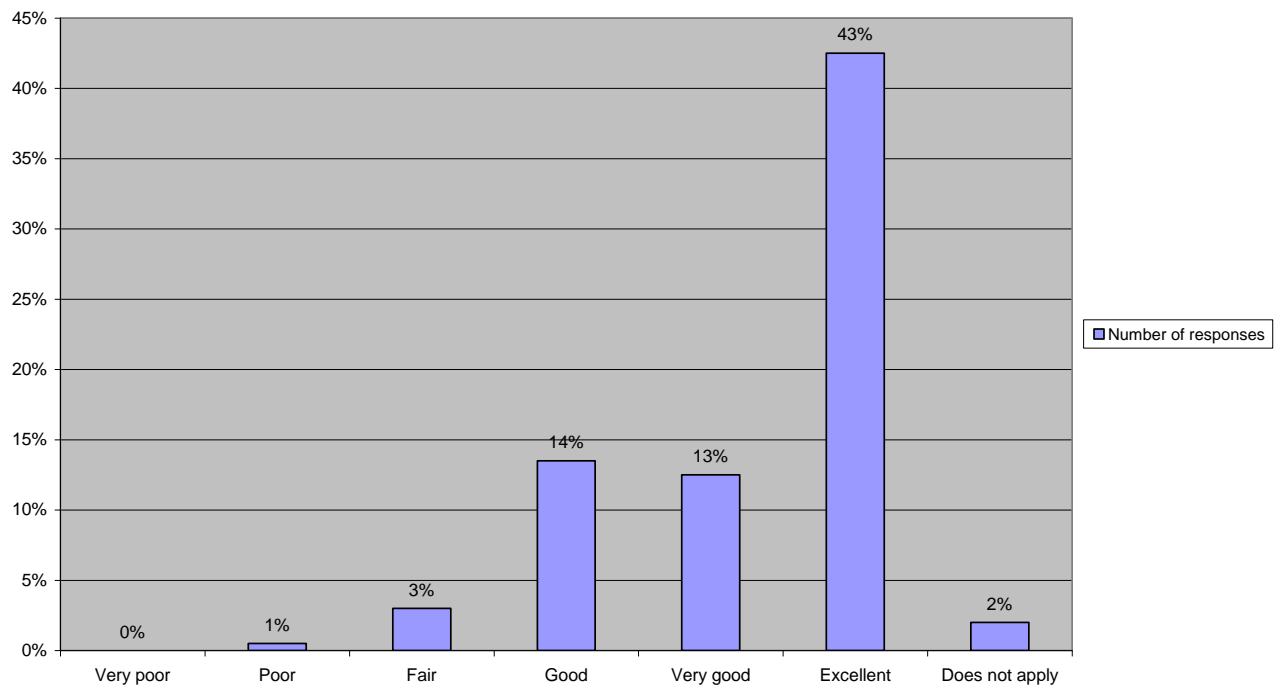
Question: Thinking about your consultation with the doctor today, how thoroughly the doctor asked about your symptoms and how you are feeling?



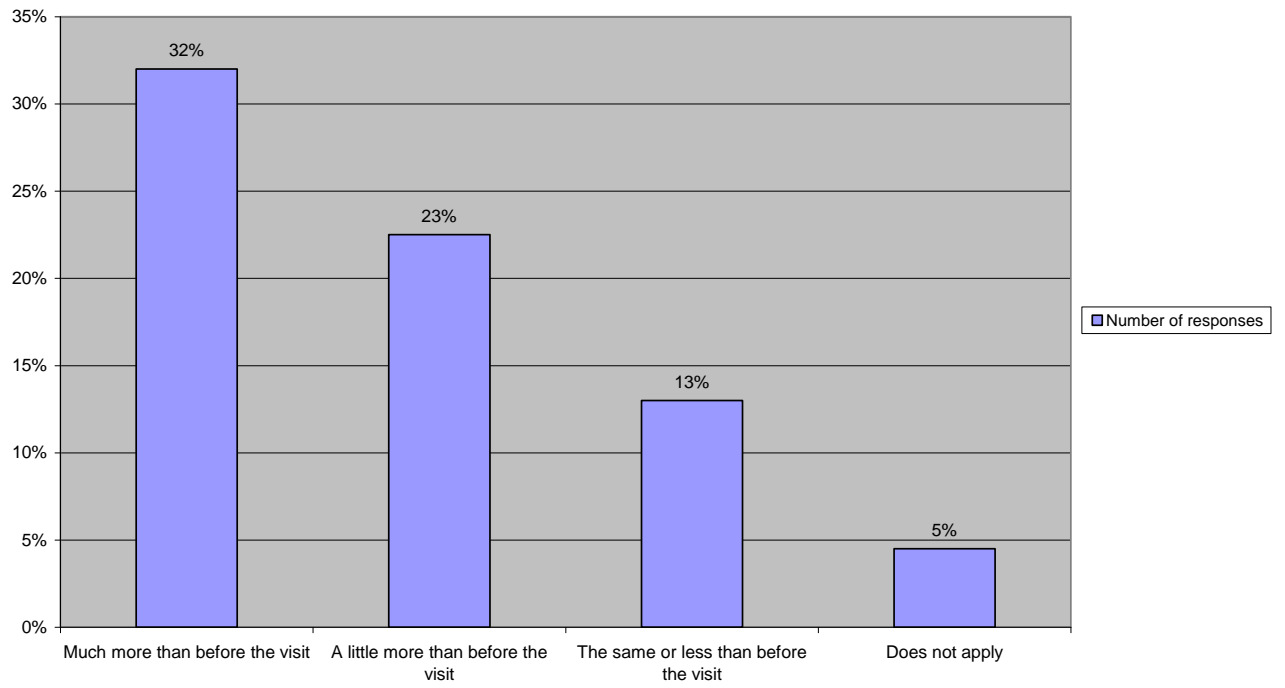
Question: Thinking about your consultation with the doctor today, how well the doctor listened to what you had to say?



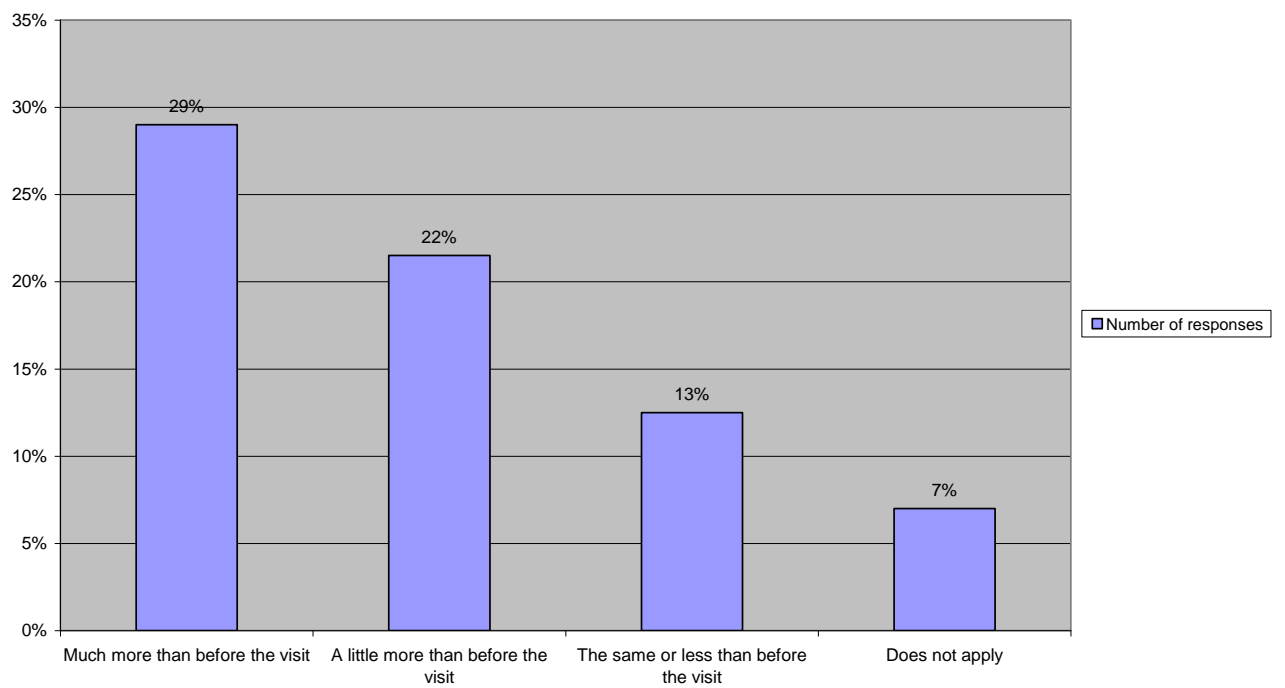
Question: Thinking about your consultation with the doctor today, how well the doctor put you at ease during your physical examination?



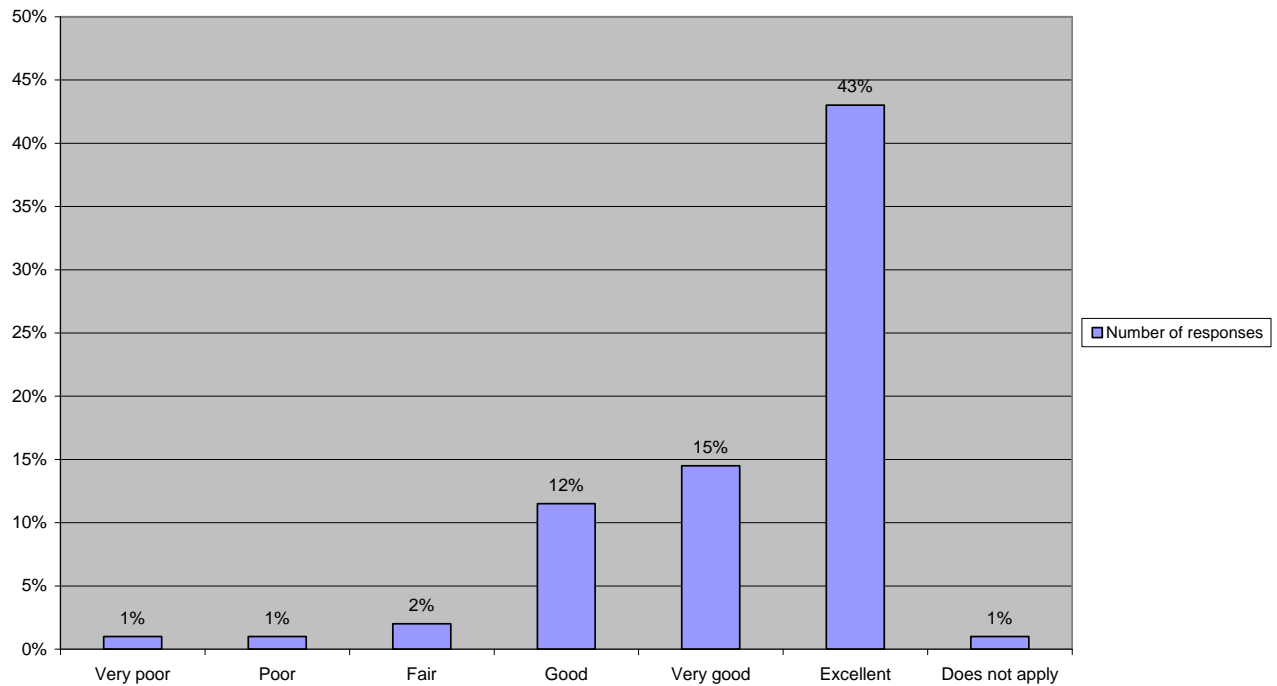
Question: After seeing the doctor today, do you feel able to understand your problem(s) or illness?



Question: After seeing the doctor today, do you feel able to keep yourself healthy?



Question: Thinking about your consultation with the doctor today, how do you rate the doctor's care and concern for you?



Suggestions For Improvement

Telephone system – Majority of the comments in the questionnaires were concerning waiting times on the telephone. The previous issue with the telephones was that while waiting in the queue, the calls were disconnected. However, this has now been resolved but patients are not happy that they have to wait for up to half an hour sometimes to book a same day appointment. We discussed that this was due to the high number of callers calling at the same time and all wanting same day appointments. There is a need for educating the patients about appropriate use of the appointments and pre-booking wherever possible.

Female GP – Compared to last year, there were fewer complaints and comments concerning availability of a female GP at the practice. The Practice has increased the sessions of the female GP during the week.

Reception Staff – Role of reception staff in making the patients feel satisfied, be more accommodating and report any issues to the senior staff.

Demand and capacity review – The practice will review the appointments availability by doing a demand and capacity assessment in the summer this year.

DISCUSSION ABOUT RESULTS

- The survey results were discussed in detail in the PRG meeting on 18.03.2014, which enabled the practice to compile an action plan based on the findings of the survey.
- The results were presented as a graphical interpretation of responses received for individual priority areas, such as ability to book appointments for any GP, satisfaction with opening hours, satisfaction with waiting times etc. to aid the PPG in understanding the results.

➤ The practice and the group agreed with the action plan as outlined in the section below. It was agreed that the Practice manager would send a final copy of the action plan to all group members.

ACTION PLAN

<u>Action</u>	<u>Task</u>	<u>Timeline</u>
1. Increase awareness about extended hours surgery and Saturday opening hours	Practice will advertise more about the Friday late evening surgery and weekend opening hours.	Ongoing
2. Increase awareness about the Out of Hours service.	Practice will advertise more about the Out of hours service. Reception staff to inform patients about this and put more notices up in the waiting area.	Ongoing
3. Handling DNA's	As last year, practice will continue to monitor DNA's on monthly basis. Patient's with more than 3 DNA's will be deducted from the practice list.	Monitor and publish monthly DNA figures.
4. Increase patient education to help inform best use of the services and reduce pressure on appointments	Practice will continue to educate the patients on appropriate use of services.	Ongoing
5. Chronic Disease clinics	Dr Rahman will start special chronic disease clinics after April 2014. Patients with complex medical problems and chronic diseases will be regularly reviewed in these clinics with a view to provide better access and care to these patients. This will also help to reduce A&E attendances and emergency admissions.	Ongoing.
6. Female GP	Female GP, Dr Oomatia will be doing more sessions during the week starting	Ongoing

	from May 2014.		
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ACCESS

OPENING HOURS

FirstCare Practice is open:

- *Monday to Thursday 08.00 – 18.30*
- *Friday from 08.00 – 20.00.*
- *Extended hours on Friday evening 18.30 – 20.00 and on Saturday mornings (08.00 – 13.00) that enables patients (particularly those in education/working) to access appointments at a later time/weekends.*

EXTENDED HOURS

- *The practice provides extended opening hours on Friday evenings 18.30 – 20.00 and Saturday mornings 08.00 – 13.00.*
- *The healthcare professionals available on these sessions are a GP and a nurse. Patients can pre-book appointments with the nurse. GP's appointments for Friday late evening are booked on the day from 1pm, allocated on first come first serve basis.*
- *GP's appointments on Saturday are booked from 8am on the day, allocated first come first serve basis. There are few Saturday appointments that are available to be pre-booked by patients especially patients requesting to see a Female GP only.*
- *Patients can ask the receptionist to pre book Saturday appointment if they are working or cannot attend during weekdays or only wish to see a Female GP.*

ACCESS TO SERVICES

Contact Details:

First care Practice

Balsall Heath Health Centre

43 Edward Road,

Balsall Heath,

Birmingham,

B12 9LP

Tel: 0121 4404666

Accessing Appointments

- Patients can make same day morning GP appointments by calling in to the practice from 9am, allocated on first come first serve basis.
- Patients can make same day afternoon GP appointments by calling in to the practice from 1pm, allocated on first come first serve basis.
- The Practice also offers online facilities, to enable patients to book appointments online via a secure website. Patients will need to obtain a secure password to access internet booking of appointments.
- Patients can log in at 9am to book same day morning GP appointments and 1pm to book same day afternoon GP appointments.
- Patients can pre-book appointments by calling in to the practice at any time.
- Home visits can be booked for housebound patients by calling in to the practice as soon as possible after 8am.
- Appointments for the nurse or Health Care Assistant can be made at any time by phoning reception.
- When the surgery is closed between 18:30 and 08:00 the Out Of Hours number can be accessed by calling the surgery telephone number.

The practice has text messaging facilities to remind patients of their appointment, as well as providing health promotion messages.

PUBLICATION OF THE REPORT

The final report can be accessed via a link on the practice website, which directs the reader to the BSC website. The report is also published on the BSC website.

- FirstCare Practice Website Address: www.firstcare-web.org
- BSC Website Address: www.bhamsouthcentralccg.nhs.uk
- Hard copies are available in surgery on request.