

**Spring hall Medical practice**  
**Patient Participation Group Report**

**2012-2013**

Practice Name	Spring Hall
Draft / final submission	Draft
Date Received	
Assessed by	
Date	

The current practice population is 8989

The table below shows the percentages of patients registered with the practice and also the percentage of patients who have taken part in the patient participation group.

Practice population profile No.	PRG profile No.
<b>Age</b>	
Under 16 22.8%	Under 16 0.0%
17 - 24 10.3%	17 - 24 0.0%
25 - 34 15.7%	25 - 34 0.14%
35 - 44 13.9%	35 - 44 0.63%
45 - 54 12.5%	45 - 54 0.17%
55 - 64 10.1%	55 - 64 1.20%
65 - 74 7.1%	65 - 74 2.01%
75 - 84 5.0%	75 - 84 0.0%
Over 84 2.5%	Over 84 0.0%
<b>Total</b> <b>99.9%</b>	<b>Total</b> <b>4.15%</b>
<b>Ethnicity</b>	
<b>White</b>	<b>White</b>
British Group 53.7%	British Group 0.51%
Irish 0.5%	Irish 0.0%
<b>Total</b> <b>54.2%</b>	<b>Total</b> <b>0.51%</b>

Mixed	Mixed
White & Black Caribbean 0.0%	White & Black Caribbean 0.0%
White & Black African 0.0%	White & Black African 0.0%
White & Asian 0.2%	White & Asian 0.0%
<b>Total</b> <b>0.2%</b>	<b>Total</b> <b>0.0%</b>
Asian or Asian British	Asian or Asian British
Indian 1.6%	Indian 0.7%
Pakistani 24.7%	Pakistani 0.27%
Bangladeshi 0.2%	Bangladeshi 0.0%
<b>Total</b> <b>26.5%</b>	<b>Total</b> <b>0.97%</b>
Black or Black British	Black or Black British
Caribbean 0.1%	Caribbean 0.0%
African 0.2%	African 0.0%
<b>Total</b> <b>0.3%</b>	<b>Total</b> <b>0.0%</b>
Chinese or other ethnic group	Chinese or other ethnic group
Chinese 0.2%	Chinese 0.0%
Any other 0.3%	Any other 0.0%
<b>Total</b> <b>0.5%</b>	<b>Total</b> <b>0.0%</b>
Gender	
Male 52.1%	Male 0.27%
Female 47.9%	Female 0.49%
<b>Total</b> <b>100%</b>	<b>Total</b> <b>0.76%</b>

The practice made the decision to set up a face to face patient participation group in 2011. Over the last 2 years the practice has tried to ensure that the group would be representative of the practice population by advertising the group meetings in the surgery and at the branch surgery. The practice sent several SMS text message to all patients with a mobile number on their records. The practice also sent an email to all patients with an email address on their records. This did prove to be an effective way to recruit participants for the group and we were able to get a few more male patients and patients from ethnic backgrounds taking part. We also have one patient who has been unable to attend the meetings but has taken part previously via email. All clinical, reception and administration

staff were encouraging patients of all of the groups, in person and over the phone, to take part in the group. I have included a copy of all posters and application forms which were used. It was also advertised on the NHS Choices website and the surgery's own web site ([www.springhallgrouppractice.co.uk](http://www.springhallgrouppractice.co.uk))

Terms of reference for the patient participation group were again discussed and agreed

1. Contribute to the practice decision making and will consult on service development and provision.
2. Provide feedback on patients needs, concerns and interests and challenge the practice constructively whenever necessary.
3. Serve as a "safety valve" for dealing with grumbles and complaints about the practice representing patients but also helping them to understand the practices viewpoint.
4. Communicate information about the community which may affect healthcare
5. give patients a voice in the organisation on their care
6. Promote good health and higher levels of literacy by encouraging and supporting activities within the practice and promoting preventative medicines.
7. Influencing the provision of secondary healthcare and social care locally.
8. Fundraise for medical equipment or other facilities to improve the practice and or fund the activities of the PPG
9. Liaise with other PPG in the area

The surgery held 3 meetings in total in 2012 one in the afternoon and two in the evening. The first of the evening meetings did have a better attendance and after discussion with the group it was agreed that any future meetings would be held in the evening. At both meetings Dr Nagpaul discussed the practice questionnaire and asked the patients to think of any questions they felt should be included which were not already. We asked the patients for examples of things Spring Hall did well and things we could do better to see if that could give us any ideas on new questions for the survey. We found that the majority of the queries raised were things which could be answered immediately. Questions like, why couldn't patients have blood tests done at another practice maybe one they were working close to. One query was how the surgery advertised the GP's in the surgery, as one patient was unsure how many GP's the surgery had now or what their names were.

It was agreed that the old display board was out of date and a new board should be installed and pictures of the GP's added. After a long discussion about how the group could move forward it was agreed that a question should be added which referred to the Patient Participation group and volunteers for any future events at the practice. All of the queries raised and their replies are listed in the minutes from each meeting.

The group agreed that the surgery would try to ensure that at least 150 patients were given a paper questionnaire to complete and this should be done over a few weeks at different times of the day. The results were collated and the results have been published on the website.

The surgery decided at the group meeting on Tuesday 27<sup>th</sup> March that they would discuss the results from the national survey instead of the internal survey as we had discussed the internal one the previous year. The results from the national survey are also on the website ([www.springhallgrouppractice.co.uk](http://www.springhallgrouppractice.co.uk))

The Key themes discussed at the meeting were access to the appointments at the surgery and how this could be improved. The group discussed how easy it was for patients to contact the surgery on the phone and why. One of the patients suggested it could be time that they are calling, for instance at peak times of the day. They suggested that a statement could be added to the website to advise patients to avoid these times for routine problems. This could also be added to the Jayex message system in the surgery. Also it was suggested that the surgery could try to put more reception staff on at busy periods. The group also discussed the idea for booking appointments online but they all agreed that with the triage system this would not work very well so the decision was made by the group to leave booking appointments as they are by phone or in person.

Another area discussed was if patients felt they could be overheard in the reception area. The patients did agree with the surgery that the acoustics of the surgery and position of reception did mean sometimes patients could be overheard. The surgery has agreed to look at the suggestions given which are listed below for reducing this. One suggestion was or the chairs to be moved from the nurses' station but this would mean that more people would be sitting in front of the reception desk which would mean less privacy there. So we have opted for looking at perhaps altering the reception desk and installing speakers in the nurses' station instead.

The rest of the meeting was used to discuss the questions regarding how the patient felt about the care given by the GP and the way their care was explained to them. The group discussed the length of time they spent in the surgery waiting for their appointment and it was a general agreement that the quality of the appointment was more important than the time spent waiting. The patients agreed that feeling that the doctor had listened to you matters more.

A copy of all of the points the group discussed are available in the minutes on the practice website. Listed below are the points which were discussed and the actions which were agreed between the practice and the group.

<b>You Said</b>	<b>To do – done</b>	<b>The result is</b>
Put statement for busy periods on website and Jayex	We have agreed to do this	The statement will be added to the website soon
More reception staff at busy periods	We will look into altering the staff rota	More staff at busy periods
Radio to be played in reception area to help with confidentiality	New speakers to be fitted in reception area	Radio to be played during surgery hours.
Chairs to be moved from nurses station	Unable to do this as this will mean more people sitting by the reception desk	New speaker to be fitted in nurse waiting area instead.
Could look at altering the reception desk to allow for more privacy	May contact a builder to see if it can be altered	
Ensure GP rota on system for 4 weeks	Where possible we will endeavour to do this	4 weeks appointments on system
Doctors speciality to be listed with photos in receptions	Done	Doctors speciality listed with photos
Could have photos of all staff members and job roles to be put up in receptions	To be agreed with staff	
Comments form in reception	Done	Comments added to suggestions form
Request for more frequent patient participation group meetings	We will see if it is possible to hold more often	We will check with the lead on this

Spring Hall surgery opening hours are as follows

Monday 08.00 – 19.30

Tuesday – Friday 08.00 - 18.30

The branch surgery opening hours are as follows

Monday – Friday 08.00-18.30

Saturday 09.00-12.30

Urgent appointments are booked through telephone consultation with the Duty Dr. For routine appointments there are  $\frac{3}{4}$  of all available slots open to pre- book with a further  $\frac{1}{8}$  which open 2 days in advance the rest are used by the Duty Dr who will book the urgent appointments.

This report and the results of the patient survey will be available at our website

[www.springhallgrouppractice.co.uk](http://www.springhallgrouppractice.co.uk). The results will also be available on the notice boards at both Spring Hall surgery and the boots branch. The report will be advertised in the surgery using the Jayex system and the notice board.

Dates for the next meeting will be posted in both surgeries and on the Spring Hall website and the NHS choices website