



# **Crayford Town Surgery**

## **Patient Participation Report 2013 – 14**

**Produced for the  
Patient Participation DES 2013 – 14**

**Version No: 1**

## 1. **Introduction.**

1.1 The purpose of the Patient Participation Directed Enhanced Service (DES) is to ensure that patients are involved in decisions about the range and quality of services provided, and over time commissioned by their practice.

1.2 It aims to encourage and reward practices for routinely asking for and acting on the views of their patients. This includes patients being involved in decisions that lead to changes to the services their practice provides or commissions, either directly or in its capacity as a gatekeeper to other services.

1.3 The DES aims to promote the pro-active engagement of patients through the use of effective patient participation groups, usually referred to as PPG's, to seek the views from patients through the use of a local practice survey.

1.4 The outcomes of the engagement and the views of patients are then required to be published as a report on the practice website.

1.5 This report summarises the development and outcomes of the survey carried out by Crayford Town Surgery. It contains details relating to:-

- **The continued development of the Patient Participation Group.**

A summary of the recruitment process used to ensure that the PPG is of sufficient size to be as representative as possible of the practice population.

- **Method and process for agreeing priorities for a practice survey.**

The method the practice adopted to seek the view of the PPG in determining the priority areas for the practice to look at to include in a local practice survey.

- **Details and results of the practice survey.**

A description of the survey and how it was carried out, as well as details of the survey results.

- **How the results of the practice survey were discussed.**

Details of how the practice consulted with the PPG.

- **How the action plan was agreed with the PPG.**

Details of the agreed action plan setting out the proposals arising out of the survey, how they can be implemented together with any issues that arose that cannot be addressed in the action plan and the reasons why.

- **How the report was published.**

Details of where this report has been published and also details of the practices opening hours and how patients can access services.

- **Practice Declaration.**

Confirmation that the report is a true and accurate representation of the work undertaken to fulfil the requirements of the Patient Participation DES 2013 -14.

## **2.The establishment of the Patient Participation Group.**

### ***DES Component 1.***

As part of DES component 1 this practice is required to establish a PPG comprising only of registered patients and use best endeavours to ensure their PPG is representative.

Practices must strive to encourage feedback from patients that extend beyond the mix of their race, ethnicity, sex, age or religion. These would include patients from marginalised or vulnerable groups such as elderly patients, the very young, patients with mental health issues, patients with learning disabilities or other disabilities and those with various social factors such as their work patterns or employment status”.

### ***Background.***

2.2 Given the background information on the evolution of the practice in the 2011 – 12 report the practice has actively been looking at ways in which the membership of the PPG could be increased during 2013 - 14. These included:-

- Adverts being placed on the PPG notice board.
- Patients being verbally asked opportunistically.
- Four specific recruitment days, 2 of which took place during Flu Clinics due to the high volume of patients coming to the practice.
- Details of how to join the group being attached to the patient survey.
- Patients being given the option of either attending the regular meetings and / or becoming a virtual member.
- More use of social media such as Facebook.
- Representatives being sought via the Teenage Health, Ante-natal and NHS Health Check clinics.
- Seeking representation from residential homes and hostels for the mentally ill.

2.3 The above has resulted in an increase in the core membership to 9 but more significantly a rise from 23 to 46 virtual members. The core patient group now includes 3 male and 6 female patients. The age groups represented are:-

- 40 – 50 = 3
- 60 – 70 = 5
- 70+ = 1

2.4 Information taken from the Network of Public Health Observatories shows that the practice has a higher number of males and females in the 30 – 34, 40 – 44 and 45 – 59 age ranges than both the Bexley and National prevalence's.

The ethnic make-up is as follows:-

- 1 Black British
- 1 Black African
- 7 White British

2.4 The group met every 6 weeks between April 2013 – March 2014.

### **3 . Method of process for agreeing priorities for practice survey.**

As part of component 2 of the DES practices are required to agree which issues are a priority and include these in a local survey. The PPG and the practice will shape the areas covered by the local survey. The areas covered in the survey will therefore, need to be agreed jointly on key inputs including the identification of:-

- *Patients priorities and issues*
- *Practice priorities and issues including themes from complaints*
- *Planned practice changes*
- *Care Quality Commission (CQC) related issues*
- *National GP's and / or local patient survey issues*

3.1 Each member of the PPG was consulted on the survey using virtual means in January 2014. The final version therefore contains their comments and suggestions and is based on agreed priorities taking into account the feedback obtained in 2012 – 13.

3.2 In addition complaints received since April 2013 were analysed to determine any recurring themes. In the main these were regarding the telephone system, availability of appointments and the wait to be seen in the practice.

### **4. Details and results of the local practice survey.**

#### ***Component 3.***

As part of component 3 of the DES practices are required to collate patient's views through a local survey and inform the PPG of the findings.

The practice must undertake a local practice survey at least once per year. The number of questions asked in the local survey will be a matter for the practice and the PPG to agree. Questions should be based on the priorities identified by the PPG and the practice”.

4.1 Given the general themes highlighted in 3.2 the group felt that it was important to obtain a general overview from patients as to how they perceived the running of and services provided by the practice. As a result agreement was given to using a survey which looked at the following key areas:-

- Access to a Healthcare Professional
- Obtaining a repeat prescription
- Obtaining test results
- The staff
- Overall satisfaction with the practice

4.2 In order to distinguish between registered and walk in patients (that are registered with another practice in the area) a decision was made to hand out the survey to only registered patients presenting at the practice.

4.3 The results of the survey were collated in-house.

4.4 The survey was handed out in the practice during weeks commencing 27<sup>th</sup> January and 3<sup>rd</sup> February 2014 with a total of 238 being handed out and completed over that 2 week period. Although not all of the questions on each questionnaire were answered the feedback was nevertheless useful in determining levels of patient satisfaction and included on the overall analysis.

## **5. How the results of the survey were discussed with the PPG.**

### ***Component 4.***

As part of component 4 of the DES practices are required to provide the PPG with the opportunity to comment and discuss findings of the local survey and reach agreement with the PPG on changes in provision and manner of delivery of service.

5.1 The results of the survey were shared with each member of the PPG and comments sought via virtual means on two occasions.

5.2 All patients will have access to the results of the survey on the practice website. A hard copy will also be displayed on the PPG notice board within the practice.

5.3 The responses can be found attached as Annex 1 and 2.

## **6. Agreeing an action plan with the patient participation group.**

### ***Component 5.***

As part of component 5 of the DES the practice is required to agree with the PPG an action plan setting out the priorities and proposals arising out of the local survey. They are also required to seek agreement from the PPG to implement any changes and where necessary inform NHS England (or other appropriate organisations where such functions may have been delegated).

6.1 The main priorities and actions agreed with the PPG were:-

- To continue working on identifying ways in which an improved service can be offered to those patients wishing to book appointments or contact the practice via telephone.
- To continually review the availability of pre-bookable appointments either in advance or on the day and build in additional capacity where required.
- To review the weekly appointment schedule to identify opportunities for offering further late nights.
- To enable members of staff to deal effectively with patients via ongoing learning and development.
- Information on likely waiting times (especially where clinics are running late) to be regularly updated and given to patients as they present.
- To look at alternative ways in which telephone calls / patients presenting can be managed to reduce queues / waiting times at reception.
- To continue to develop on-line services such as prescription requests, making / cancelling appointments, self help videos and information resources that patients can access either on or off site.
- To identify ways in which appointments can run to schedule and therefore reduce waiting times to see Healthcare Professionals whenever possible.
- Ensure a more effective telephone system is installed in the new premises.
- To continue to conduct at least 1 survey a year which the PPG will be responsible for in terms of identifying the topic of the surveys.

6.3 Aside from the issues highlighted as a result of the survey the PPG will actively continue to seek new members by way of the means described earlier

in this report and by the wider use of 'Virtual Groups'. In addition as matters progress with regards to a new building development the PPG will endeavour to involve and seek the views of all patients.

6.4 The action plan will be monitored at future PPG meetings.

## **7. Publishing the participation survey report.**

### ***Component 6.***

As part of component 6 of the DES the practice is required to publicise the local Patient Participation report on the website and update the report on subsequent achievement. The practice should publicise the report as extensively as possible and ensure it appears on the practice website by no later than 31 March 2014.

7.1 The local participation report can be found on the practice website:-

[www.mycts.org.uk](http://www.mycts.org.uk)

7.2 The patient survey results were distributed to members in March 2014. The results have been published on the surgery website and a hard copy put up on the PPG notice board. The plan for in-house discussion is via staff meetings during April 2014.

7.3 As the practice offers services to registered and non-registered patients the site is open between the hours of 0800 – 2000 with the appropriate services being offered during this time depending on registration status and the actual service(s) required. Depending on demand patients may not be booked in after 1930.



## **8. Practice declaration.**

The practice confirms that the above report is a true and accurate reflection of the work undertaken as part of the participation DES 2013 / 14.

Signed and submitted to NHSE and published on the website on behalf of the practice by:

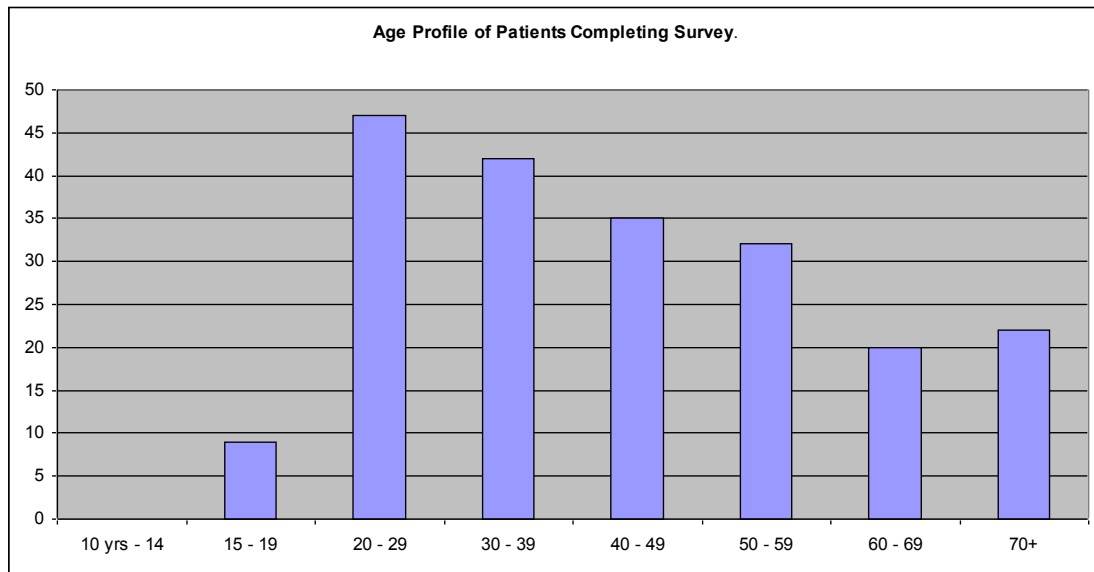
**Name:**

**signed:**

**Designation**

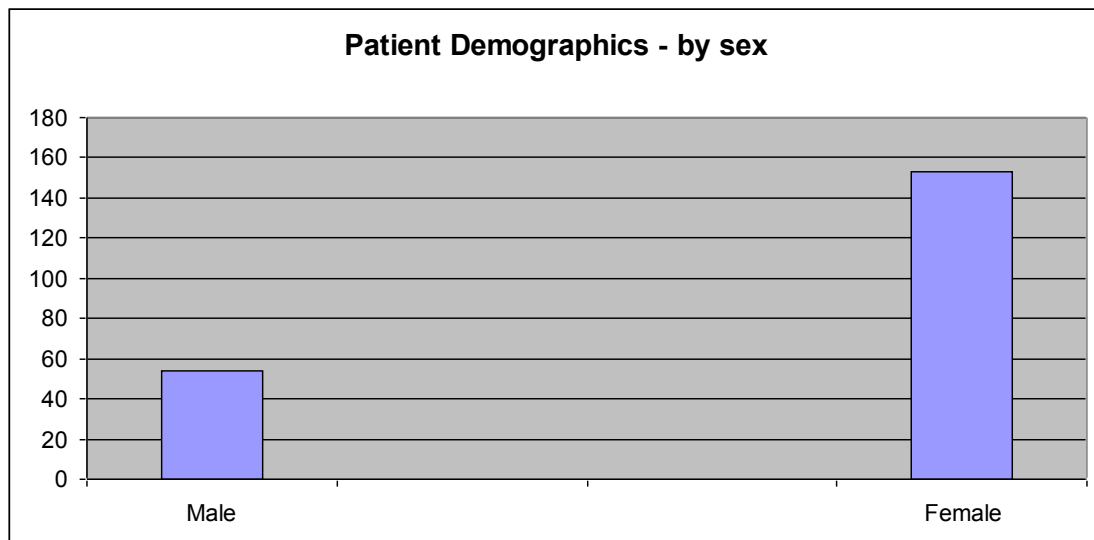
**Date:**

## ANNEX 1



**Chart 1.**

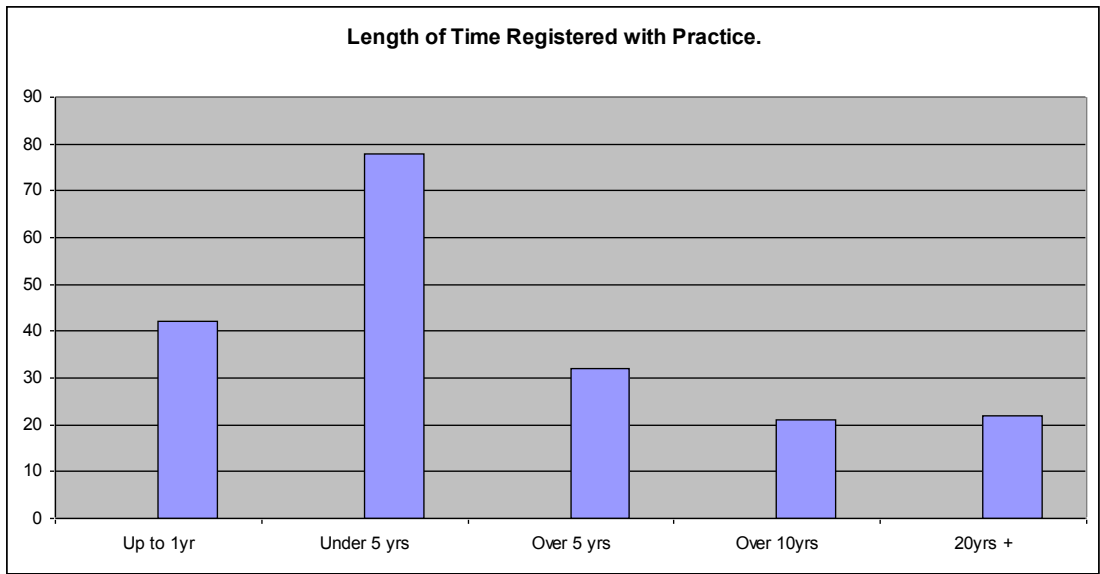
The above chart shows that the majority of patients completing the survey were between the ages of 20 and 59. Some patients did not complete this section hence the figures not tallying with the total number of questionnaires completed.



**Chart 2.**

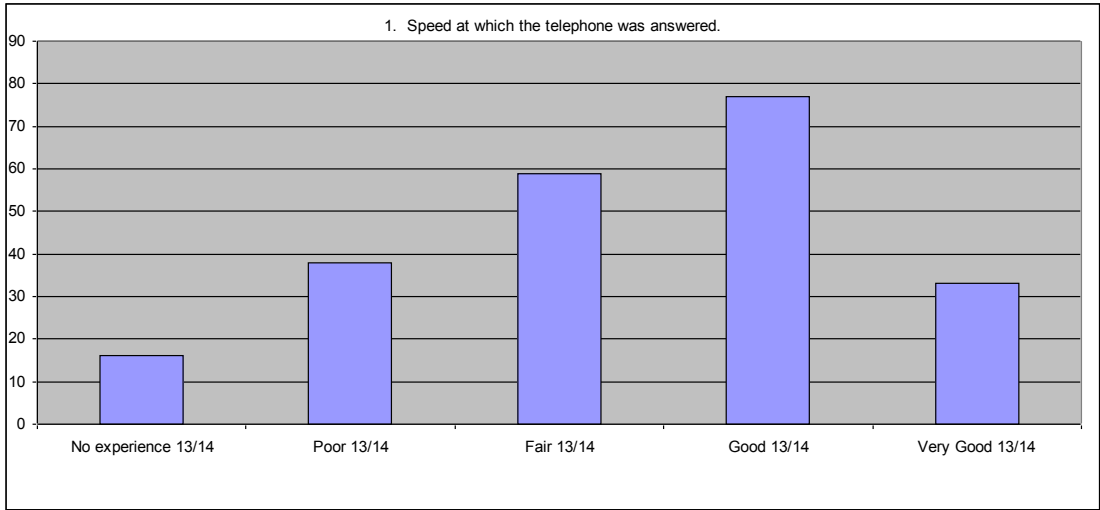
Chart 2 gives a breakdown of the number of male (54) and female (153) patients completing the questionnaire.

**Chart 3.**



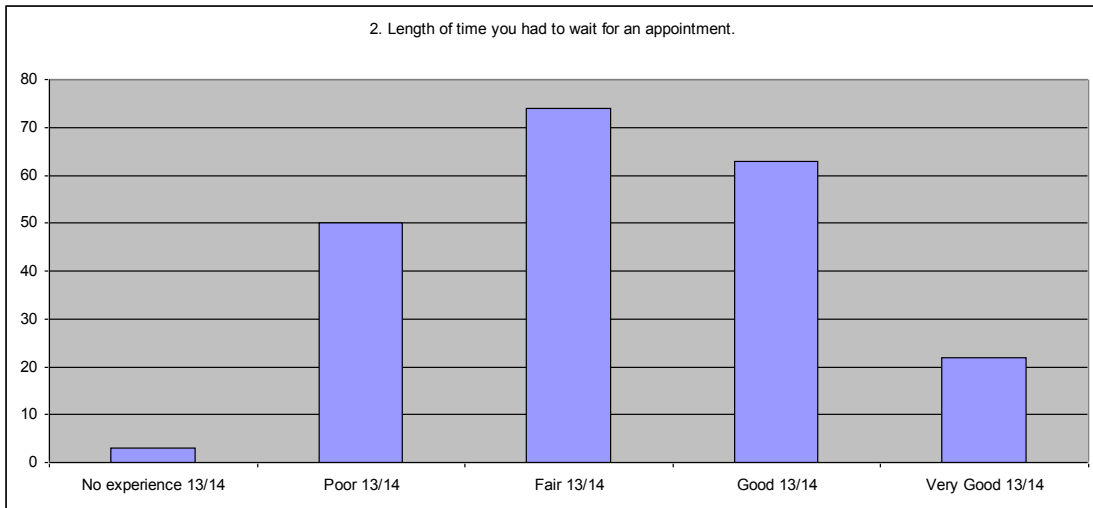
**Chart 3.**

As in the previous year this survey asked patients completing the questionnaire how long they had been registered with the practice. Chart 3 shows that the majority (78) were under 5 years.



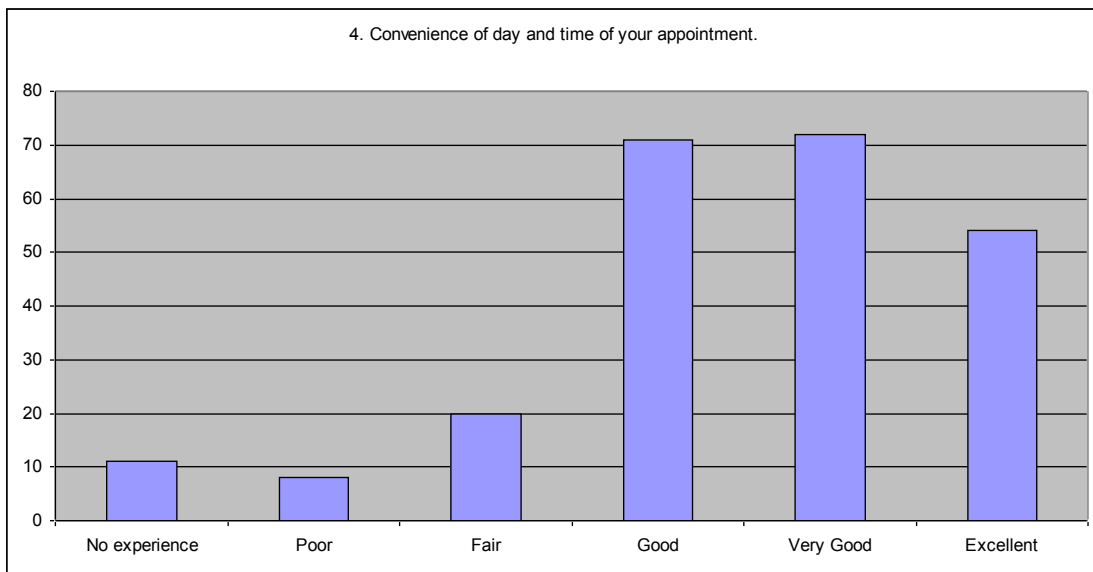
**Chart 4.**

Getting the current telephone system to work effectively has been an on-going process so it is therefore reassuring to learn that patients felt that the speed at which the telephone is answered is 'Good'.

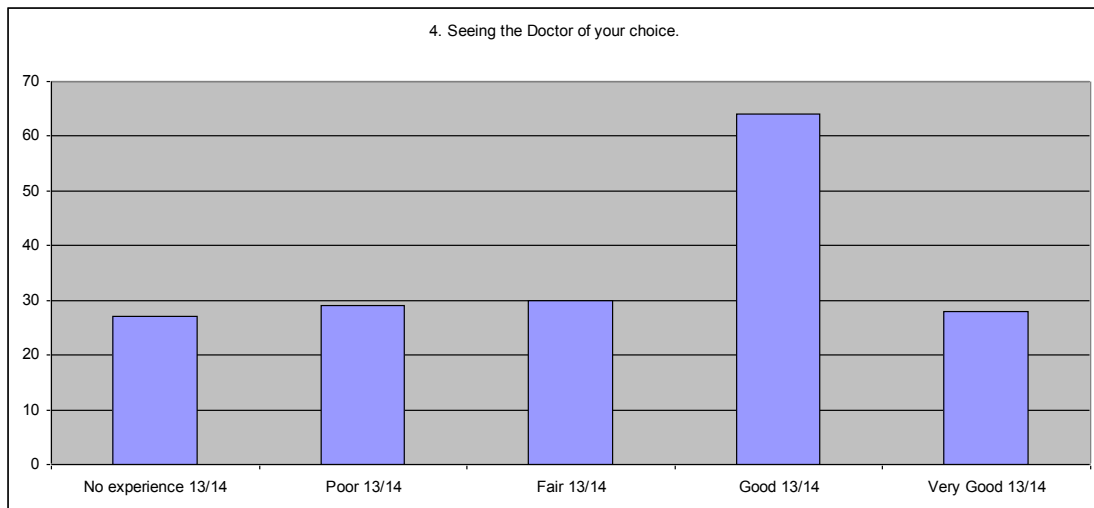


**Chart 5.**

Chart 5 and 6 highlight that waiting times for appointments on the whole are 'Fair' to 'Good' and that the convenience of the day and time range from 'Good' to 'Excellent'.

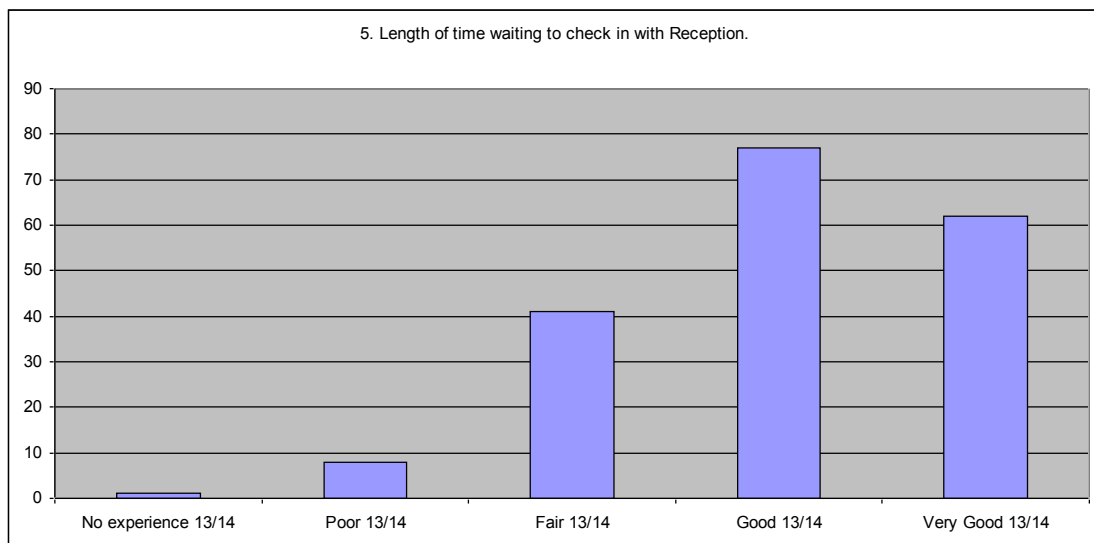


**Chart 6.**



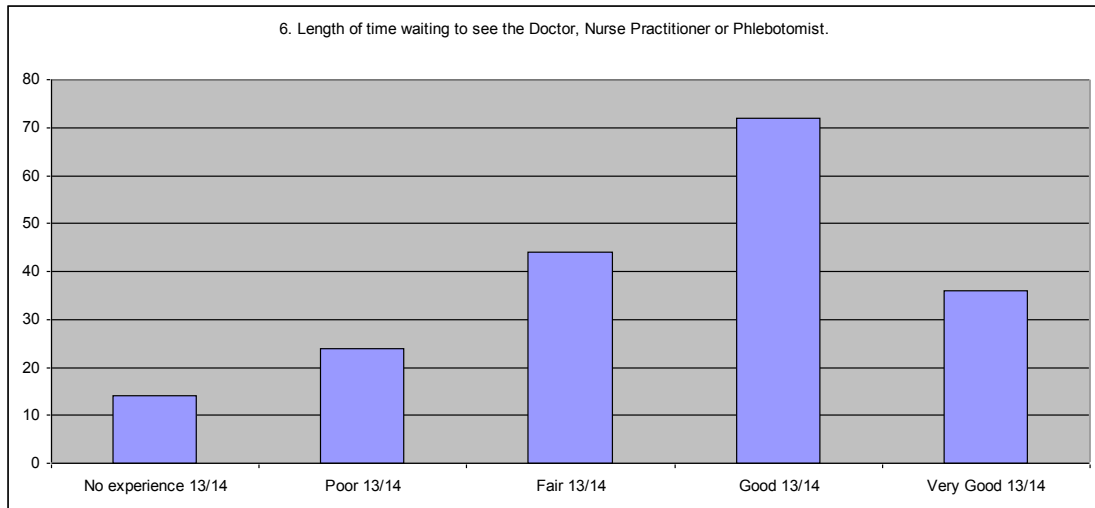
**Chart 7.**

Chart 7 shows that patients are able to see a Doctor of their choosing the majority of which rated this 'Good' in terms of being actually able to do so. Some survey's had however been annotated to say that patient's were not aware that a specific Doctor could be asked for when booking an appointment.



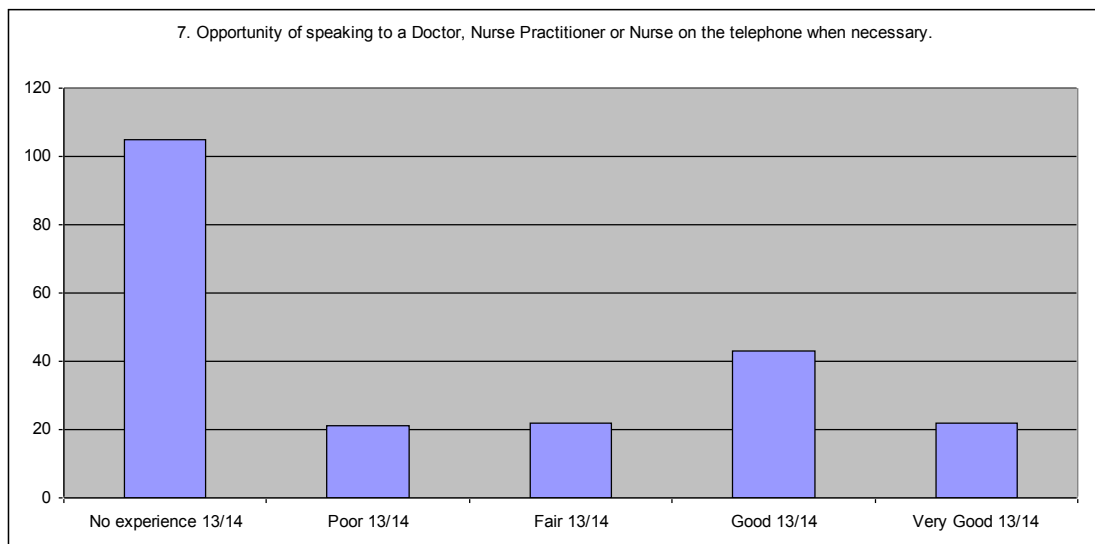
**Chart 8.**

Given the confines of the Reception Desk and area it was pleasing to note in Chart 8 that waiting times were on the whole 'Good'.



**Chart 9.**

Chart 9 shows that the waiting times to see a Practitioner were 'Fair' to 'Good'. There was some adverse feedback on this particular area which can be found in the qualitative data attached as Annex 2.



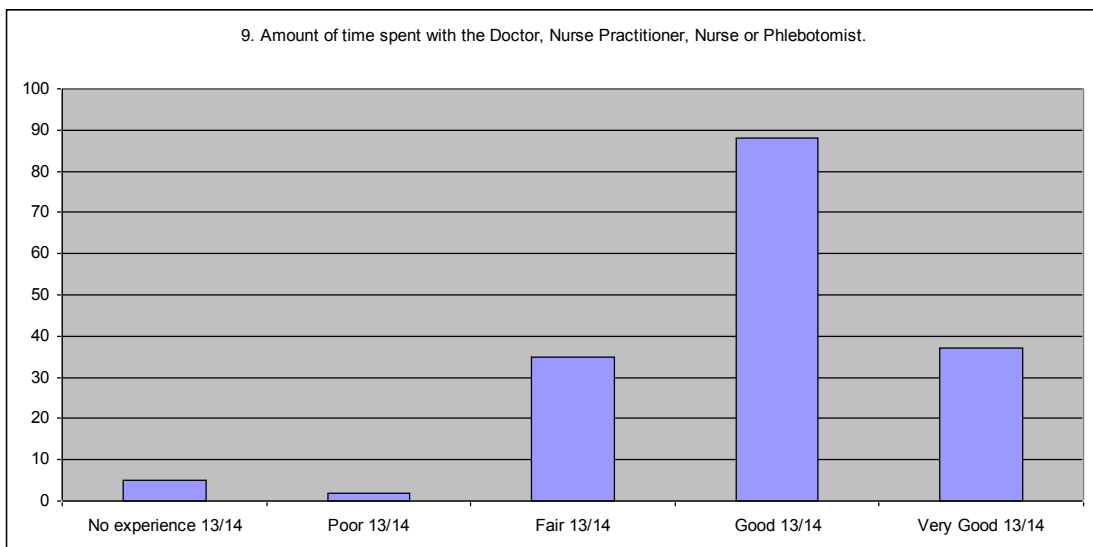
**Chart 10.**

The vast majority of patients had no experience of being given the opportunity to speak to a Practitioner on the telephone. This again was an area that had been annotated to say that patients were not aware of this service.



**Chart 11.**

Chart 11 shows that most patients had no experience of obtaining a home visit when necessary. Those that did however rated it overall as 'Good'.



**Chart 12.**

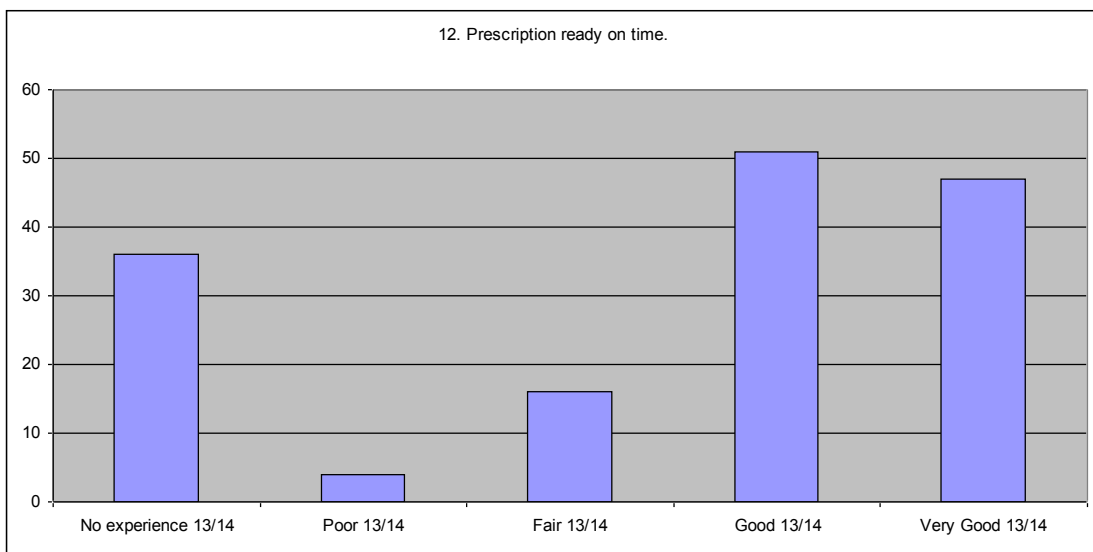
The amount of time spent with a Practitioner rated highly as 'Good'. The number of patients stating that they had no experience is somewhat misleading in that the survey was only given to patients that were attending for an appointment.



**Chart 13.**

Chart 13 shows that patients rated having their presenting problem dealt with to their satisfaction as 'Good' to 'Very Good'. Again, a number of patients indicated that they had no experience of this area.

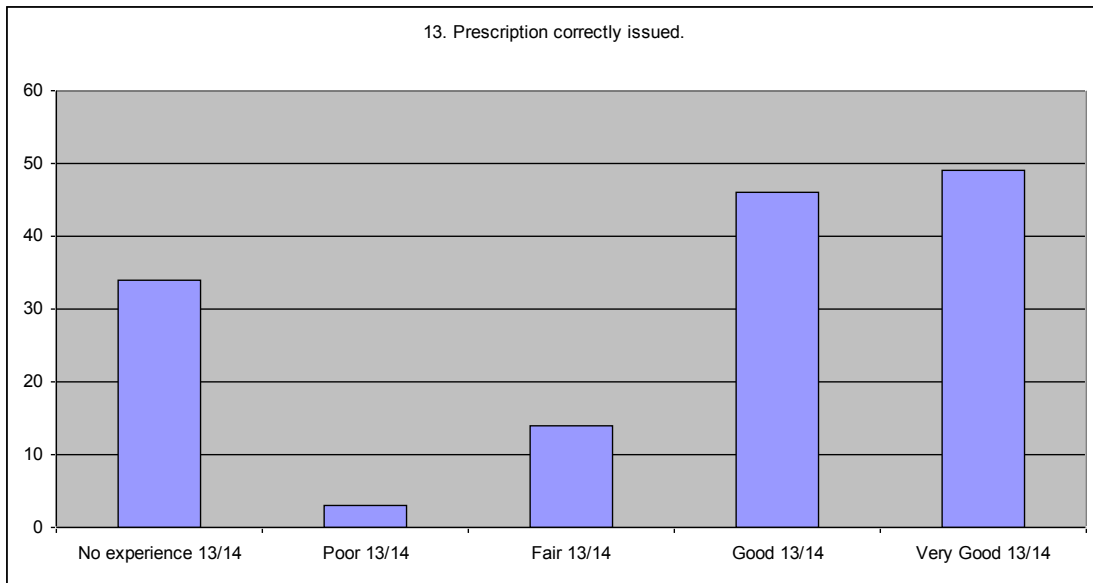
**Obtaining a Repeat Prescription.**



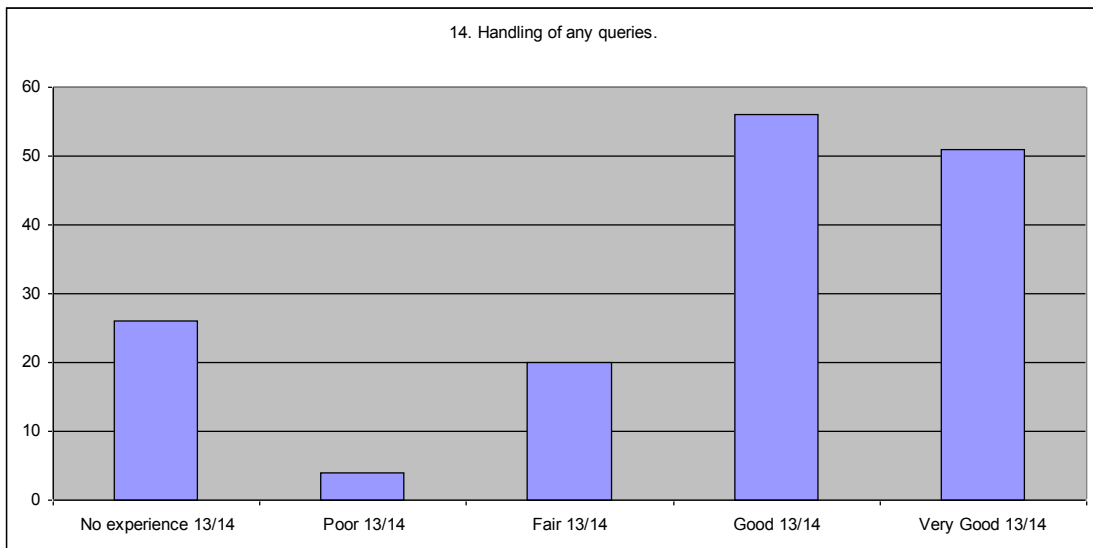
**Chart 14.**

The revised administration processes around issuing prescriptions would appear to be working well given the 'Good / Very Good' ratings highlighted in Charts 14, 15 and 16. It is assumed that those with no experience do not have repeat prescriptions.



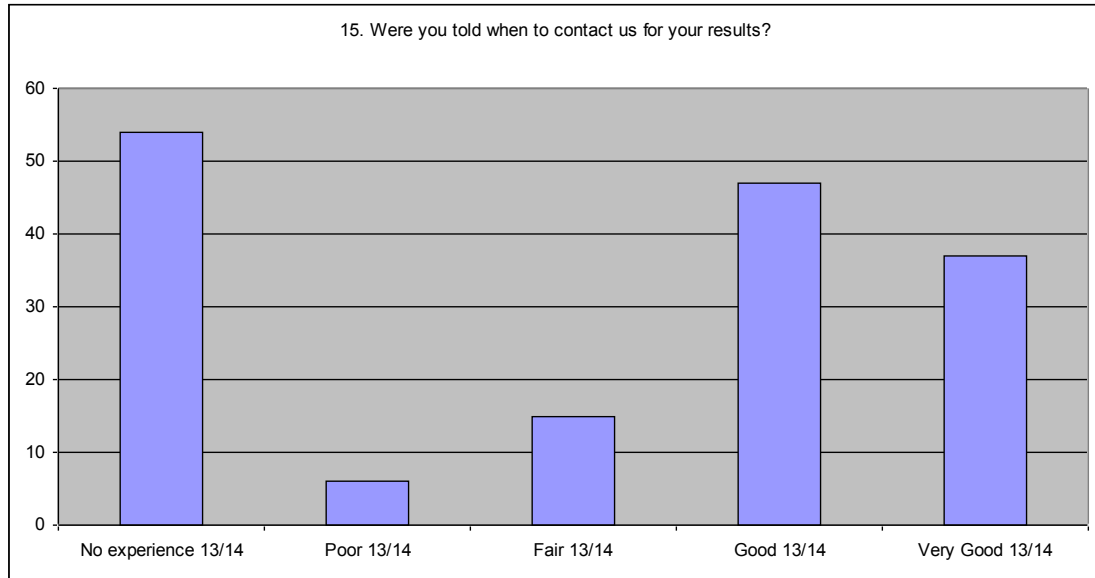


**Chart 15.**



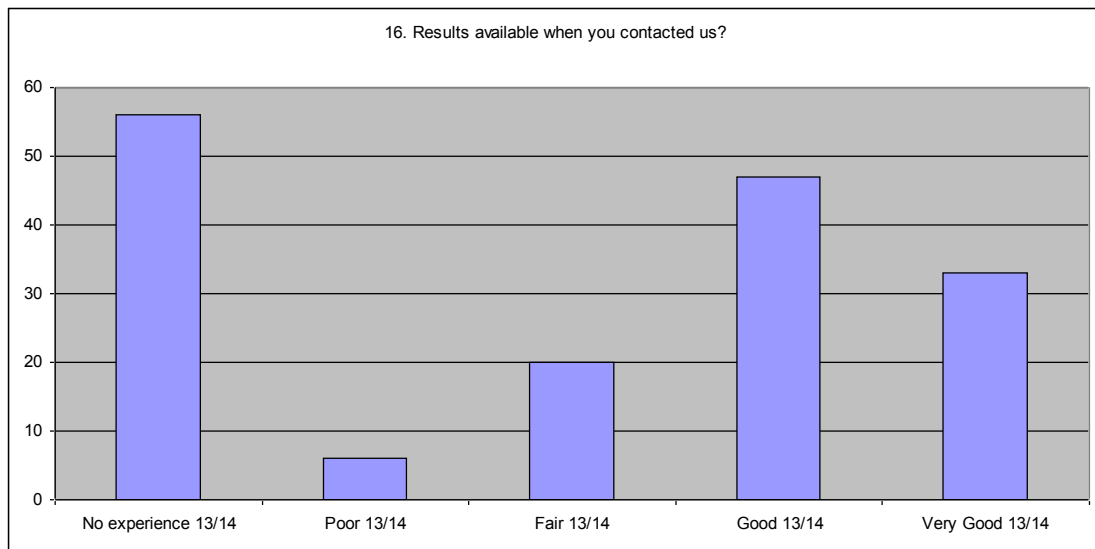
**Chart 16.**

## Obtaining Test Results.

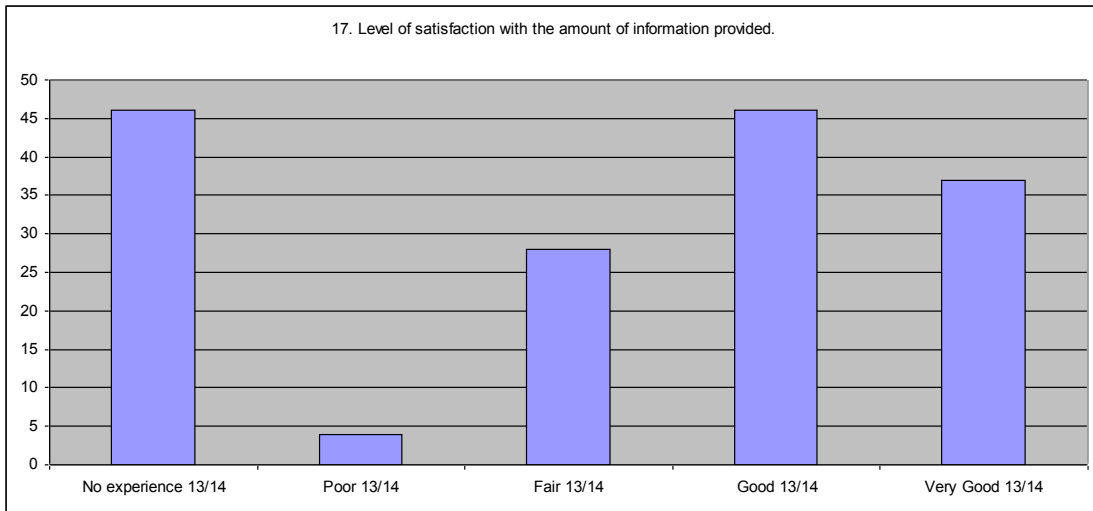


**Chart 17.**

Information provided to patients on when to contact the practice for test results was rated as 'Good' and the availability of these as 'Good' in Charts 18 and 19 respectively. The latter is to some extent outside the practices control but is nevertheless an area for further improvement.

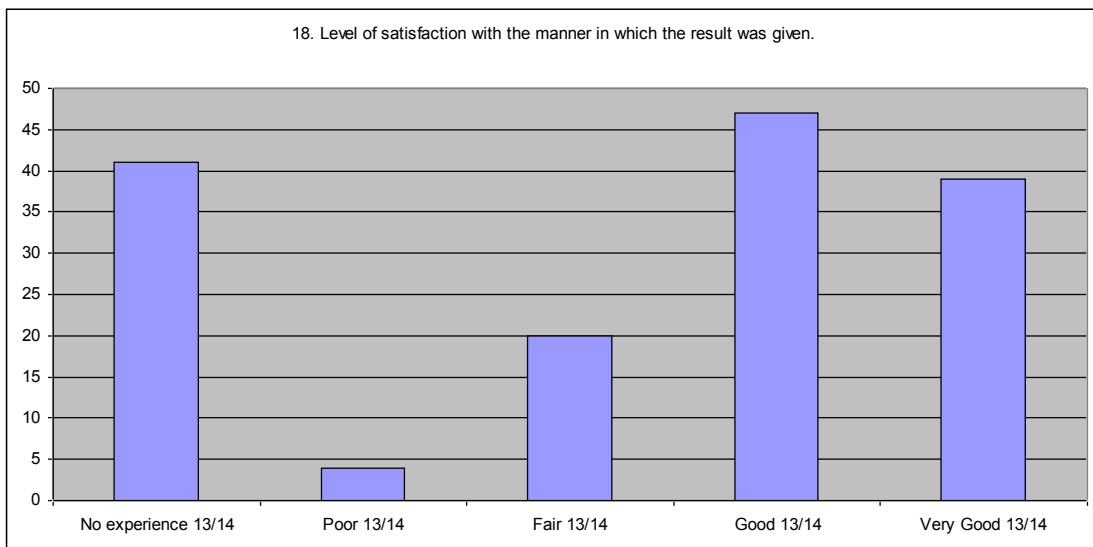


**Chart 19.**



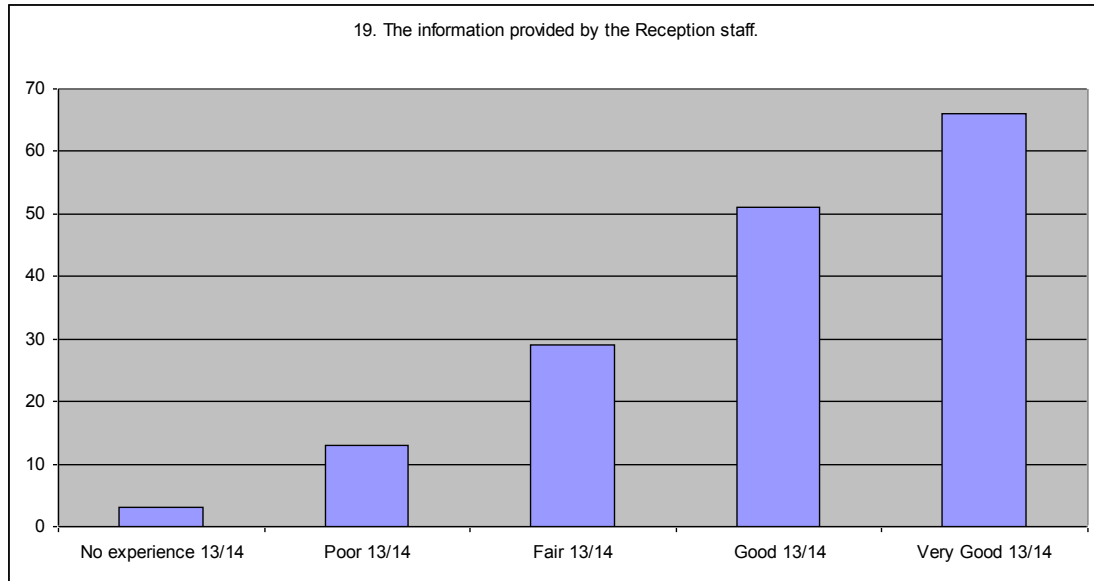
**Chart 20.**

Charts 20 and 21 demonstrate that the level of satisfaction with the amount of information provided on test results and the manner in which it is given is 'Good'.



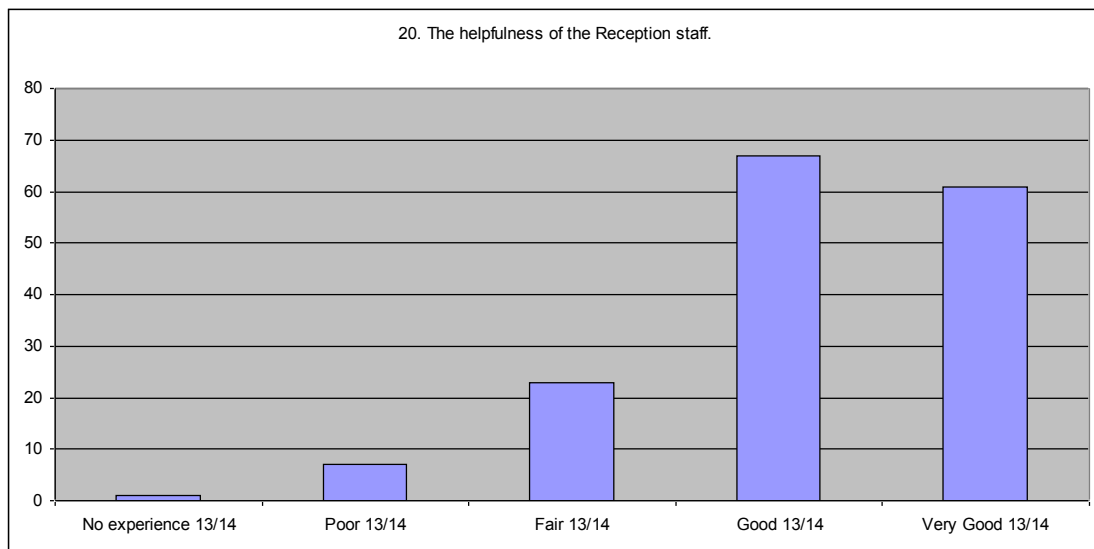
**Chart 21.**

## About the Staff.

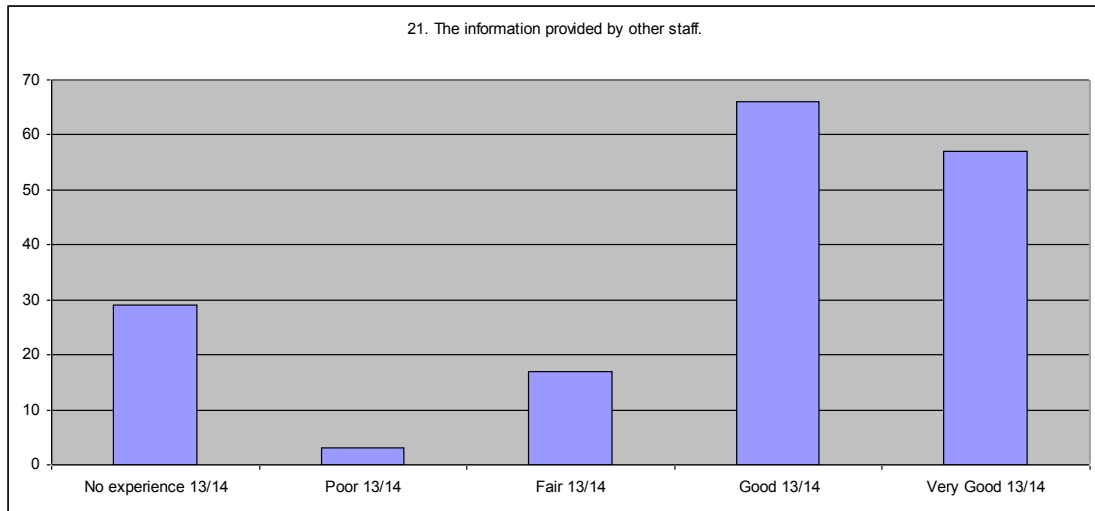


**Chart 22.**

The majority of patients rated the information provided by Reception Staff in Chart 22 as 'Very Good' and 'Good' in terms of helpfulness (Chart 23).

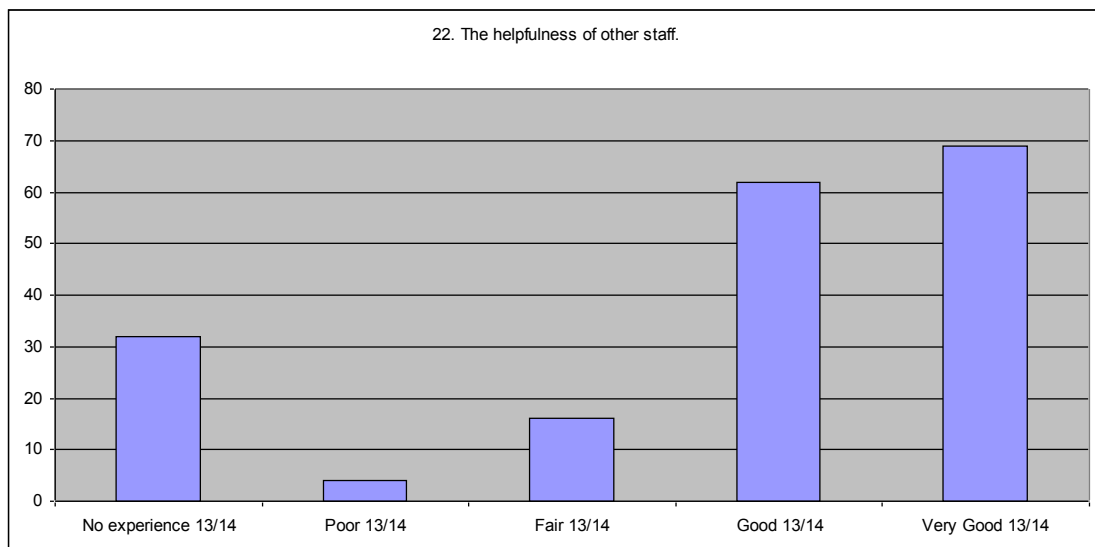


**Chart 23.**



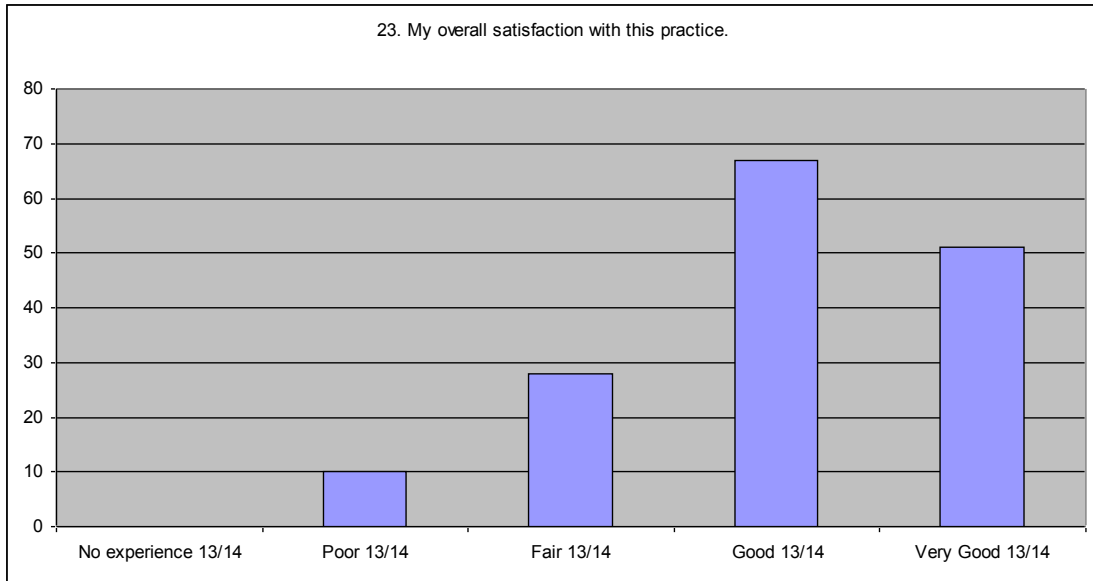
**Chart 24.**

This theme continued in that the information provided by other staff and their helpfulness (Charts 24 and 25) also rated highly as 'Good / Very Good'.



**Chart 25.**

**Overall satisfaction with this practice.**



**Chart 26.**

Chart 26 shows that overall patient satisfaction with the practice is 'Good'.