

THE COASTAL PARTNERSHIP
Ormesby Village Surgery
Hemsby Medical Centre
North Caister Medical Centre
Martham Health Centre
Old Palace Road Surgery
Beechcroft Surgery

Patient Participation Report 2013/14

Produced for the Patient Participation DES 2011/2014

1. Maintaining the Patient Participation Group

Maintain a structure that gains the views of patients and enables the practice to obtain feedback from the practice population via the Patient Reference Group (PRG)

DES Component 1

As part of component 1 of the DES Practices are required to establish a Patient Reference Group comprising only of Registered Patients and use best endeavours to ensure their PRG is representative.

Recruiting to the Patient Reference Group (PRG)

1.1 Is the PRG still representative of the practice population? If not, what has the practice done to try and engage underrepresented groups?

In an attempt to allow the groups to increase and continue to represent the population of the practice we have offered leaflets to patients, made specific PRG information boards in each surgery which displays information about how to join and the aims of the group; we have posters on our rolling PIP screen and information on the website. We also regularly use the facility of the local Parish Magazines.

We also appointed a Chair and Secretary to the group.

1.2 If this is the first year of your PRG, has a properly constituted structure been developed to reflect the practice population and to obtain feedback? How were representation sought and what work was carried out to engage with any underrepresented groups?

Up to now our groups in Norwich have been virtual; This year we have made particular effort to telephone patients, representing all groups of patients to encourage them to join a face to face group. We have also changed the times of the group to help accommodate those patients that are available in the day.

We have a constitution in place which has been agreed by the members.

All staff are regularly reminded to speak to patients as part of the new registration process.

We also encourage our current members to talk to their own community to encourage others to join.

Practice Profile

Village Sites	Practice Profile	PRG Profile
Population	17,273	21
Ethnicity	4.5% non-white	4% non-white
Age Distribution	Under 15's 15.3%	Under 15's 0%(but represented by youth group leaders and the Children's Centre)
	Over 65's 40%	Over 65's 33%
Dominant Age Range	60 – 70yr olds	55 – 65yr olds

Norwich Sites	Practice Profile	PRG Profile
Population	6326	8
Ethnicity	12% non-white	0% non-white

Age Distribution	Under 15's 15%	Under 15's 0%
	Over 65's 21%	Over 65's 22%
Dominant Age Range	55 – 65yr olds	55 – 65yr olds

Practices must strive to engage and encourage feedback from patients that extend beyond a mix of just age/sex and ethnic origin. These could include patients from marginalised or vulnerable groups such as elderly patients, patients with a learning disability or other disability and those with various social factors such as working patterns, employment status and carers etc.

Step 2. Method and Process for Agreeing Priorities for the Local Practice Survey

Agree areas of priority with the Patient Reference Group (PRG)

Component 2

As part of component 2 of the DES Practices are required to agree which issues are a priority and include these in a local Practice Survey.

The PRG and the Practice will shape the areas covered by the local practice survey. The areas covered in the local practice survey will, therefore, need to be agreed jointly based on key inputs and 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 and/or Local Patient Survey issues

2.1 What process was used to seek the views of the Patient Reference Group in identifying the priority areas for the survey questions i.e via email, website etc?

We discussed and reviewed the action plan from last year

We have had general discussions at PRG group meetings

We keep the patients informed via the PIP screens and Notice Boards

We email members and other patients who have shown an interest in what's happening within the surgery

We discuss what is happening within the Area PRG

Following all of the above, and after full discussion, it was agreed that we would identify questions from last years report where we scored the least and include them with additional questions agreed from the above consultations. A draft questionnaire was produced, circulated and agreed.

During our recent CQC inspection at Old Palace, no comments were raised from patients to be included within the action plan.

2.2 What priorities were identified by the PRG and how have these been included in the survey?

Seeing the doctor of Choice

Time waiting for an appointment

Process for obtaining blood results

Requesting a repeat prescription

Step 3. Details and Results of the Local Practice Survey

Collate patient views through the use of a survey

Component 3

As part of component 3 of the DES Practices are required to collate patients views through a local practice survey and inform the Patient Reference Group (PRG) of the findings.

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



3.1 Was a survey carried out between 01.04.13 and 31.03.14?
Survey was carried out between 1st and 28th February 2014

3.2 What method(s) were used to enable patients to take part in the survey (i.e survey monkey, paper survey, email, website link) and why?
We used paper forms
Survey Monkey
Telephone Survey

We introduced Survey Monkey this as another method of entry but found that very few patients went away to complete. The best capture was in the waiting room where we had members of the PRG helping patients to complete.

3.3 Was the survey credible (was the response rate sufficient to provide 'the reasonable person' with confidence that the reported outcomes are valid)?
Yes, 246 completed, 7 on line, the rest presented in hard copy. 62 forms were invalid because they were not complete.

3.4 Please provide a copy of the survey and the analysis of the results of the survey.

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Patient Survey Results	Patient Survey 2014

Step 4. Discussing Survey Results with the Patient Reference Group (PRG)

Provide the Patient Reference Group (PRG) with the opportunity to discuss survey findings and reach agreement with the PRG of changes to services.

Component 4

As part of component 4 of the DES Practices are required to provide the Patient Reference Group (PRG) with the opportunity to comment and discuss findings of the local practice survey and reach agreement

with the PRG of changes in provision and manner of delivery of services. Where the PRG does not agree significant changes, agree these with the PRG.

4.1 How were the views on the survey results sought from the PRG and any proposed outcomes agreed?

The results of the meeting were circulated to all members of the PRG, to the staff and Partners of the Practice.

Members were asked to consider the results and feed back any comments they might wish to raise. A meeting was held on 24th March to discuss the report and form an action plan, which was circulated to all members and displayed on the website and surgery notice boards. Copies were also made available to patients.

We agreed that we need to try and recruit younger members to the PRG; It was agreed that the Chair and Secretary would write to local high schools again and community groups with a view to visit. We also agreed that the Chair would write a 12 month report of achievements of the group.

Step 5. Agreeing an Action Plan with the Patient Reference Group (PRG)

Agree an action plan with the Patient Reference Group (PRG) and seek PRG/AT agreement to implement changes.

Component 5

As part of component 5 of the DES the practice is required to agree with the PRG an action plan setting out the priorities and proposals arising out of the local patient survey. They are also required to seek agreement from the PRG to implement any changes and where necessary inform the PCT.

5.1 What action plan was agreed and how does this relate to the survey results?

Actions

Reduced numbers of completed questionnaires: Future surveys would be completed using paper copies distributed within the surgery. Raise awareness of patients that survey can be circulated and returned by email.

Patients finding it difficult to make an appointment: We have recently recruited two GPs who will be starting in April so will ensure more equitable distribution of doctors across the sites; Will also look at the distribution between on the day and pre -bookable appointments

No-one using On-line Booking: Raise awareness of the service to patients, via PIP screens, posters, printed on scripts etc.

Long waiting time to see the GP: This is also an action outstanding from last year; Agreed to work with particular GP to implement ways to help improve waiting times.

5.2 How was the PRG consulted to agree the action plan and any changes?

A meeting was held where actions were agreed; the draft of which was circulated to all interested parties with an end date to circulate the final action plan and any further comments.

5.3 If there are any elements that were raised through the Survey that have not been agreed as part of the action plan what is the reason for this?

No

5.4 Are any contractual changes being considered? If so please give details and confirmation that these have been discussed with the AT.

We had no contractual changes to make

Step 6. Publishing the Local Patient Participation Report

Publicise actions taken and subsequent achievement

Component 6

As part of component 6 of the DES the practices is required to publicise this Local Patient Participation Report on the Practice website and update the report on subsequent achievement **by no later than 31/03/2014**. A copy must also be sent to the AT by then.

6.1 Are there any further actions that have occurred from the:

2011/12 Action Plan



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2012/13 Action Plan



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2014 Action Plan



Action_Plan 2014.doc

In addition the Practice required to provide details of Practice opening hours and how Patients can access services through core hours

6.3 What are the practices opening hours and how can patients access services during core hours (8am-6.30pm)

Opening times are 8 – 6.30 at the village sites; 8.30 – 6pm at the Norwich sites; Patients can access the Practice during this time.

Where a Practice is commissioned to provide Extended Hours the Practice is required to confirm the times at which patients can see individual health care professionals

6.4 Do you provide extended hours? If so, what are the timings and details of access to Health care Professionals during this period.

We provide extended hours at our Village sites on a Tuesday and Thursday between 6.30 and 8pm

7. 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 the PCT and published on the Practice website on behalf of the Practice by:

Name: Sharon Marsden

Signed:

Designation Practice Manager

Date:

FOR AT USE ONLY

Date Report Received by the AT: _____ Receipt Acknowledged by: _____

Report published and evidenced on Practice website by required deadline: _____