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Add practice logo here if required

**PATIENT PARTICIPATION REPORT**

**2013/14**

Practice Code:

C84706

Practice Name:

NDU SURGERY

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| **An introduction to our practice and our Patient Reference Group (PRG)** |
| ***To Be a Patient voice and to promote a patient led culture.***   Provide a choice of medium for patients to give feedback & comments about the Practice to the PPG   Develop community profiles & engagement, and collect community intelligence   Use information gathered from patients to discuss problems and potential improvements with the Practice |

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| **Establishing the Patient Representative Group**  This shows how the practice has tried to ensure that the PRG is representative of the wider practice population. Information is provided here on the practice and PRG profile. | | | |
|  | **Practice population profile** | **PRG profile** | **Difference** |
| **Age** | | | |
| % under 18 | 23% | 0% |  |
| % 18 – 34 | 26% | 0% |  |
| % 35 – 54 | 29% | 2% |  |
| % 55 – 74 | 13% | 7% |  |
| % 75 and over | % | 1.2% |  |
| **Gender** | | | |
| Male | 1279 | 7 |  |
| Female | 1042 | 5 |  |
| **Ethnicity** | | | |
| White British | (327) | 8 |  |
| Mixed white/black Caribbean/African/Asian | (92) | 2 |  |
| Black African/Caribbean | (422) | 1 |  |
| Asian – Indian/Pakistani/Bangladeshi | (51) | 1 |  |
| Chinese | (19) | 0 |  |
| Other | 1410 | 0 |  |
| These are the reasons for any differences between the above PRG and Practice profiles: | | | |
| About 60% of our currently registered patients do not have an ethnicity on their record.  We have a very diverse population, it is noted that a significant number of patients are Afro Caribbean along with other ethnicities such as Arab, Chinese. | | | |
| In addition to the above demographic factors this is how the practice has also taken account of other social factors such as working patterns of patients, levels of unemployment in the area, the number of carers: | | | |
| Reception have a close contact with patients this has enabled receptionists to engage actively with patients who very rarely attend surgery due to working commitments. | | | |
| This is what we have tried to do to reach groups that are under-represented: | | | |
| Reception staff have been actively involved in speaking to patients face to face giving the under –representing group of patients the opportunity to attend PPG meetings. Also display of leaflets on reception promoting PPG.  Those who language was a barrier or were unable to read English reception staff took out the time to sit with patients to help complete survey. | | | |

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| **Setting the priorities for the annual patient survey**  This is how the PRG and practice agreed the key priorities for the annual patient survey |
| It was agreed with the PPG that a survey was to be presented on the basis of services provided through telephoning NDU Surgery 2013/14  A list was then made to discuss what services are dealt with over the phone when contacting the surgery. Ie, telephone consultation with GP, Triage Clinic, overall satisfaction of call handling by reception staff, dealing with general inquiries on reception. Ideas where then explored what would be important to discuss in survey.  It was decided to choose the following sections for the survey which were,   * GP Telephone consultations this is a service provided by the GP the PPG Group felt it would be interesting to get feedback and suggestions as there a mixed response from patients regarding this service. * Telephoning Triage for care – a service offered to patients by the Practice Nurses felt this was important to ask patients as a trial clinic was run and to find out if this is something we can look to in the future as providing an additional service to patients when GP’s are running late. * Reception staff call handling – the Group felt that this is an important issue to raise to patients as receptionist are representatives of the practice and promoting NDU is significantly important. * Other comments – it was agreed by the group and surgery to include a comment box in the survey for patients to have an opportunity to anonymously write comments and suggestions of how they felt about the services if they did not want to put anything down on the survey. Which the results would be revealed in the PPG group. |

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| **Designing and undertaking the patient survey**  This describes how the questions for the patient survey were chosen, how the survey was conducted with our patients and includes a summary of the results of the survey (full results can be viewed as a separate document) |
| How the practice and the Patient Reference Group worked together to select the survey questions:  See comments above |
| How our patient survey was undertaken:  Survey was conducted by giving surveys to reception staff to pass on to the patients; there was also a notice board with a sign informing patients to complete surveys. Receptionists at no time were they discriminate opportunity was given to all patients to complete surveys regardless of age or gender. Those who weren’t able to come in due to work commitments or those who were housebound surveys were posted out to them. Making sure that there was no one who who’d be under represented. |
| Summary of our patient survey results:  In general there was a positive feedback regarding access appointments system and getting to speak to a GP or Nurse. There was opportunity at the end of the survey for patients to ask questions in regards the service they receive and if there are any improvements that can be made.  Items for improvement have been included in the survey result. |

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| **Analysis of the patient survey and discussion of survey results with the PRG**  This describe how the patient survey results were analysed and discussed with PRG, how the practice and PRG agreed the improvement areas identified from the patient survey results and how the action plan was developed: |
| How the practice analysed the patient survey results and how these results were discussed with the PRG:  The survey was analysed during one of our team meetings, the finding were discussed with staff. Results were drawn for the conclusion of the survey. The results were then structured into a table of contents to be presented to the PPG Group. |
| The key improvement areas which we agreed with the PRG for inclusion in our action plan were:  It was agreed that telephone calls that are made to patients for blood results need to be clarified clearly by reception staff that when patient is called in for results to inform patient the reason for this as this does alarm patients thinking that there is something wrong with them. |
| We agreed/disagreed about:  There was a disagreement between members off staff where it was suggested by the GP to have the opportunity to make own appointments on the practice website. Patients asked if they were able to book appointments with the GP only online as suggested by the GP and patients. Staff disagreed as there is a time restriction on when appointments can be made and that they are only for the GP. Should consider Nurses as well and also not all patients do not have access to the internet at home so should have opportunity with slots for patient to book appointment when they call in as well12. |

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| **ACTION PLAN** | | | | |
| How the practice worked with the PRG to agree the action plan:  Questions where shown to the PPG and additional comments were added that were included in the survey. | | | | |
| We identified that there were the following contractual considerations to the agreed actions:  N/A | | | | |
| Copy of agreed action plan is as follows: | | | | |
| **Priority improvement area**  Eg: Appointments, car park, waiting room, opening hours | **Proposed action** | **Responsible person** | **Timescale** | **Date completed (for future use)** |
| Appointments | To propose to the GP not only patients online to access appointments but also for patients telephoning to have a slot available to be free to book appointments with GP. | Zareena and Dr Udenze | 3 - 6 months |  |
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| **Review of previous year’s actions and achievement**  We have summarised below the actions that were agreed following the patient survey 2012/13 and whether these were successfully completed or are still on-going and (if appropriate) how any have fed into the current year’s survey and action plan: |
| **“You said ……….. We did ………… The outcome was ………”**  **Ongoing ….. TBC** |
| Where there were any disagreements between the practice and the PRG on changes implemented or not implemented from last year’s action plan these are detailed below:  **N/A** |

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| **Publication of this report and our opening hours** |
| This is how this report and our practice opening hours have been advertised and circulated:  NDU Newsletter copy of report available to all patients.  NDU Website copy of report to view. |

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| **Opening times**  These are the practice’s current opening times (including details of our extended hours arrangements) |
| Monday 8.30am – 1.00pm 2.00pm – 6.00pm  Tuesday 8.30am – 1.00pm 2.00pm – 6.00pm  Wednesday 8.30am – 1.00pm 2.00pm – 6.00pm  Thursday 8.30am – 1.00pm  Friday 8.30am – 1.00pm 2.00pm – 6.00pm |