

# **Patient Participation DES 2012 to 2013**

**The Surgery, Orsett**

**19 March 2013**

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# The Surgery, Orsett

## Introduction

This report summarises the development and outcomes of the The Surgery, Orsett Patient Reference Group (PRG) in Year 2 of the DES (2012/13) and is in line with the requirements of the Patient Participation Directed Enhanced Service.

### The report contains:

- Profile of practice population and PRG
  - Process used to recruit to our PRG
- Priorities for the survey and how they were agreed
  - Method and results of patient survey
- Resulting action plan and how it was agreed
  - Progress made with the action plan
  - Confirmation of our opening times

Outlined below are the details of the work undertaken by the Practice to meet each of the six steps within the Patient Participation DES

### **Step 1: Establish a PRG comprising only of registered patients and use best endeavours to ensure PRG is representative**

The Practice has worked hard to develop a Patient Group and have had a core group of members for a significant time. In recognition of the need to ensure this group was representative of the full practice list a recruitment drive was implemented in 2011/12 to attract members.

We launched an advertising campaign to recruit members to the group by:

- Putting up posters in the practice
- Offered leaflets to patients attending practice
- Speaking to patients when they came into the Practice
- Telephoned patients to personally invite them
- Placed messages on the bottom of our repeat prescriptions
- Placed a message on our website
- Used our links with local health services to target specific groups e.g. midwife asked to speak with expectant / new mums
- Set up a virtual group to encourage younger members to join
- Invitation added to online prescription service
- PRG members spoke to patients they knew e.g. disabled and carers

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## **At our PRG meeting on 15th March 2012 we reviewed our membership**

*"It was noted by the group that there were no younger members. It was agreed to alternate the meetings between day and evening, to encourage younger members to attend. **Action: JM to ask the midwife to ask mums if they would be interested in joining**"*

## **Extract of minutes, PRG meeting 30<sup>th</sup> October 2012**

*"How can we gain representation from missing areas of members on our group?"*

*AE said she may know someone who could represent the disabled and carer patient element. **Action: AE will ask and feedback.***

*It was agreed we should attempt to gain representation from patients under 30 and ethnic minorities. MC said it should be noted that there is not much diversity in the practice population. **Action: MC will mention to other partners to consider disabled patients who may join. It was agreed that Joyce would prepare a leaflet to hand out to patients attending the midwives clinic.***

*Virtual Group, Joyce showed a recommended advertising sheet for patients to sign up and said she has been advised other practices had had success by placing this on the main reception desk. DS suggested asking patients using the electronic prescription request service if they would like to join the virtual group. **Action: It was agreed Joyce would advertise the virtual group to establish a list of patients willing to join.**"*

## **Extract from minutes, PRG meeting, 29<sup>th</sup> January 2013**

*"Virtual Group. Joyce has been successful in establishing the virtual group of approximately 50 patients so far; they were invited to complete the recent practice survey. Names continue to be added to the group."*

There are currently nine members of our Face-to-Face PRG group.

The recruitment to the Virtual Group has been extremely successful attracting 84 patients at the time of writing this report, with numbers growing weekly. This is allowing us a much wider group of patients with which to share information and ideas with.

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The tables below illustrate the demographic data for our full patient list and our PRG membership.

## Patient List and PRG group age

Patient List age			PRG age	
Age Range	Total	%	Total	%
0 - 15	1401	20		
16 - 35	1421	20		
36 - 45	999	14	1	11
46 - 55	1022	14	2	22
56 - 65	1049	15	2	22
66 - 75	724	10	3	33
75 +	595	8	1	11
	7211	100	9	100

## Patient and PRG group gender

Patient list gender			PRG gender	
Gender	Total	%	Total	%
Male	3536	49	2	22
Female	3675	51	7	78

## Patient and PRG group ethnicity

Patient list ethnicity			PRG ethnicity	
Ethnic Group	Total recorded in Patient records	%	Total	%
White British	1807	94	8	89
Other Black	20	1		
Black African	35	2		
Asian	11	0.6		
Other ethnic group	56	3	1	11
<b>TOTAL</b>	<b>1929</b>	<b>100</b>	<b>9</b>	<b>100</b>

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## Step 2: Agree with the PRG which issues are a priority and include these in a local practice survey

To determine the priorities for the survey in Year 1 (2011 to 2012) we asked all patients attending the practice over a three-week period to indicate which areas they thought were most important to our patients by completing a form at reception.

The results of this exercise were presented to our PRG group by the lead GP for Patient Engagement, Dr Colburn, at their meeting on 24<sup>th</sup> January 2012. During these discussions the group agreed which areas should be the focus of the Patient Survey and discussed the questions to be included.

### Extract of minutes 24 January 2012

*"A discussion took place regarding topics for practice survey. The three priority areas were identified as*

- *Dispensary*
- *Communication*
- *Parking/Premises*

*Clear, wide-ranging and non-complicated questions were agreed for each of the topics*

*The Practice discussed the key issues of importance to patients with the Patient Group and together the questions for the survey were agreed. Once we had established the priorities we developed the questions using Survey Monkey. The group decided to discuss question options, which would give clear outcomes so that achievable action plans could be developed which would improve the patient experience."*

### Extract of minutes 30<sup>th</sup> October 2012

In Year 2 [2012 to 2013] the group again discussed the issues to be focused on in the survey at their PRG meeting of 30<sup>th</sup> October 2012:

*"The group were pleased that many of the actions from Year 1 had been completed and it was therefore decided to repeat some of the questions from the previous survey in the hope that improvements could be illustrated.*

*Additional questions were discussed and the group agreed that the priority issues for the Year 2 survey would be:*

- *Lunchtime "speak to doctor" service*
- *How to manage patient non-attendance*
- *Late running of appointments*

*It was felt that the influx of calls to speak to a doctor between 12 noon and 1pm was too intense with patients queuing for long periods and a constant barrage on the doctor.*

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*We have approx. 60 patients who do not attend for their appointment per month. It was felt that repeat offenders should have a letter asking them to consider the impact of missing appointments on the patients.*

*The Practice have received two complaints recently regarding late running of surgeries. Members of the group said they all appreciated that to provide the service they expect from the Doctors, they understand some late running does occur. They would rather have this than be rushed through with no holistic element to the consultation"*

## Step 3: Collate patient views through local practice survey and inform PRG of the findings

### We carried out the survey using:

- Survey Monkey on line
- Paper forms available at reception

### We reminded our patients to complete the survey by:

- Advertising in the surgery using posters
- Providing all patients attending the surgery with a leaflet to take away and read
- Texting a reminder to all our patients with a mobile telephone number on their records
- E-mailing all patients who had provided us with an e-mail contact address
- Our PRG members encouraged their friends and relatives who are our patients to complete our survey
- Placing a reminder on the bottom of our repeat prescriptions
- Speaking to individual patients as they attended the surgery

We carried out the survey between 26<sup>th</sup> November and 16<sup>th</sup> December and received a total of 136 responses. The results of our survey can be found in Appendix A.



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## **Step 4: Provide PRG with opportunity to comment and discuss findings of local practice survey. Reach agreement with PRG of changes in provision and manner of delivery of services. Where the PRG does not agree significant changes, agree these with the PCT**

The survey results were collated and a survey results report written (Appendix A). The patient group reviewed the survey results at the PRG meeting held on 29<sup>th</sup> January 2013 and discussed improvement actions with the practice members attending the patient group meeting.

### **Extract of minutes, PRG meeting, 29<sup>th</sup> January 2013**

***"Repeat prescribing requests by email** has proven to be popular and usage is growing daily. Agreed to continue to promote this service.*

***Late running of surgeries.** There was overwhelming support for a board on the main reception desk stating if Doctor is running on time or how many minutes late, which is regularly updated as times change.*

***Car Parking.** Suggestions from the survey for barriers or wardens patrol were felt to be unrealistic. Dr Colburn said this an insoluble problem as we are in direct competition with the hospital who charge to park. He did state that we are under no obligation to provide parking.*

***Difficulty getting an appointment.** Dr Colburn said that when a patient needs to be seen, choosing a particular doctor is of second importance. In the survey a number of patients had had difficulty getting to see Dr Kallil. As this doctor works full time it was felt that the numbers may have been distorted due to the doctor's absence.*

***Missed appointments.** It was agreed that no sanctions could be made against patients who did not attend. The onus is on the staff to mention to the patient next time they see them, this is a must and will be brought to the Drs Monday meeting.*

*A policy of book ahead of only 2 weeks was suggested, this might generate a knock on effect of complaints and more phone calls.*

***Premises.** Patient size has increased in last few years. Anne Eve asked if the patient size had possibly outgrown the premises and if they were sufficient to continue the old fashioned ways of working. Dr Colburn said the practice list size had increased quite a lot in the last few years"*

The survey results were also shared more widely with virtual group members and feedback requested via email.

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**Step 5: Agree with the PRG an action plan setting out the priorities and proposals arising out of the local practice survey. Seek PRG agreement to implement changes and where necessary inform the PCT**

**It was agreed that the following issues would be addressed by the Practice in the coming year:**

- Virtual patient group recruitment
- Communication with patients re late running of surgeries
- Inform patients of key points of patient survey
- Appointment availability
- Flexible response to prescription requests
- Building relationships with other PRGs

An action plan (Appendix B) was developed to allow for more efficient monitoring of progress.

**The key actions were:**

- Continue to advertise for new members for the virtual patient group
- Purchase a noticeboard to share information with patients
- One week patient survey regarding appointment availability to be completed
- Communicate results of patient survey in Practice
- Manage DNAs by talking to patients who miss appointments
- Continue to promote online repeat prescribing service to encourage uptake
- Build working relationships with other local PRG groups

## **Extract from minutes PRG meeting, 29<sup>th</sup> January 2013**

*"The PRG were generally pleased with the outcome of our Patient Survey and agreed with the results. There were no actions requested by the PRG that the practice would not agree to. The PRG will continue to monitor progress against the improvement plan with the practice.*

*David Shaddock said the survey demonstrates how happy and grateful the patients are at the way the surgery operates. This reinforces the fact that what we are doing is not that bad."*

There were no significant changes to our services as a result of the survey findings.



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**Step 6: Publicise the Local Patient Participation Report on the practice website and update the report on subsequent achievement. The expectation is that the year 2 reports posted by practices should build upon the year 1 report, demonstrating how issues raised in year 1 have been addressed.**

The Patient Participation DES report has been publicised within the Practice and added to our Practice Website:

**[www.orsettsurgery.wordpress.com](http://www.orsettsurgery.wordpress.com)**

## **Progress made with the action plan**

A summary of the progress against the actions from both Year 1 and Year 2 of the Patient Participation DES as of 31<sup>st</sup> March 2012 is:

<b>You said</b>	<b>We did</b>	<b>The result is ...</b>
<b>Our repeat prescription process is not convenient</b>	We have set up a dedicated e-mail address for patients to e-mail us regarding their repeat prescription	This service has proven to be popular and usage is growing daily
<b>You don't always understand what is going to happen when we request a blood test</b>	We have discussed this in our Practice Team meeting and our Doctors have agreed to explain the procedure more fully and to give an estimation of timings for results to be available	Our Doctors have been providing increased information and we will monitor this with our Patient Reference Group  No comments were received regarding this issue in the Year 2 Patient Participation survey
<b>Our doctors sometimes run late</b>	We have discussed this in our team meeting and will communicate delays with patients	In Year 2 88% patients agreed that patients should have enough time with the doctor and they accept this sometimes causes delays

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You said	We did	The result is ...
<b>You sometimes find it difficult to park at The Orsett Surgery</b>	<p>Car park sign has been installed clearly stating parking for visitors to premises only</p> <p>The PRG members felt it was aesthetically pleasing</p> <p>Letters are being put on windscreens regarding inappropriate parking</p> <p>Practice Manager has spoken to the Council to request additional patrols</p>	<p>The car park is still being used by visitors to the hospital</p> <p>Letters have been put on windscreens but patients discard them and it has no effect</p> <p>Patients are still parking on the yellow lines, which is not because of the car park being full</p> <p>There has been one accident and one near miss in recent months</p> <p>It was felt that little more could be done without a large cost implication</p>
<b>You cannot always hear our doctors when they call you into appointments</b>	We discussed this in our team meeting	Our Doctors now come right out into the waiting room to greet their next patient
You sometimes find it difficult to get an appointments	We have discussed this with our PRG	We are going to manage DNAs better to reduce wasted appointments

## Confirmation of our opening times

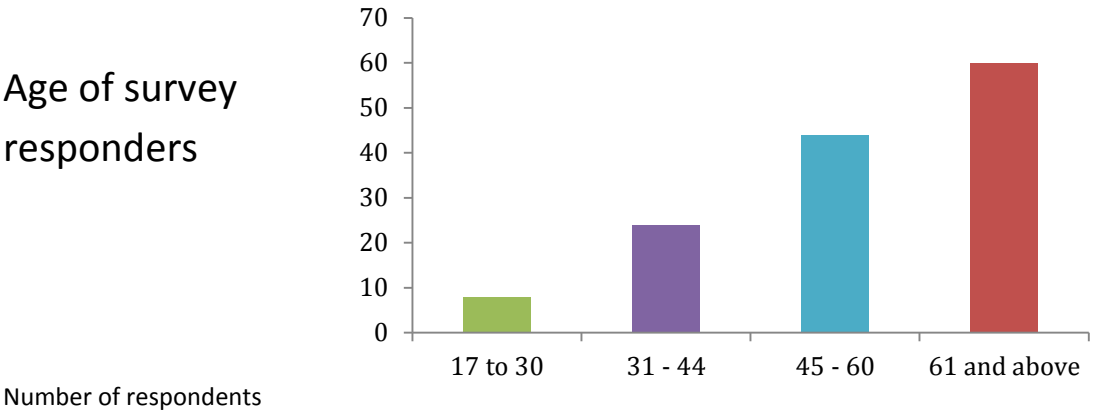
- You can call or visit the Orsett Surgery between 8.30 am and 6.45 pm weekdays
- Surgery times are 8.30 – 11.30 each weekday morning, and 4.00 – 6.30 pm each afternoon at the Orsett Surgery
- You can call or visit the King Edward Drive Branch Surgery between 9.00 am and 1.00 pm each weekday
- Surgery times are 9.00 – 10.30 each weekday morning at the King Edward Drive Branch Surgery
- Outside of our opening hours please contact the Emergency GP Service by calling the usual Practice Telephone number and you will be automatically put through

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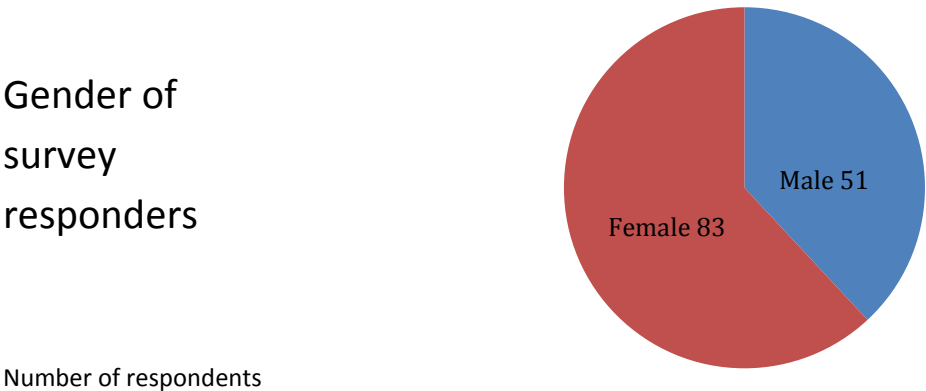
## Appendix A: Survey results report

136 patients responded to our Patient Survey. 27 patients submitted online responses via survey monkey and 109 hard copy surveys were collected in the surgery. These are the results of our survey

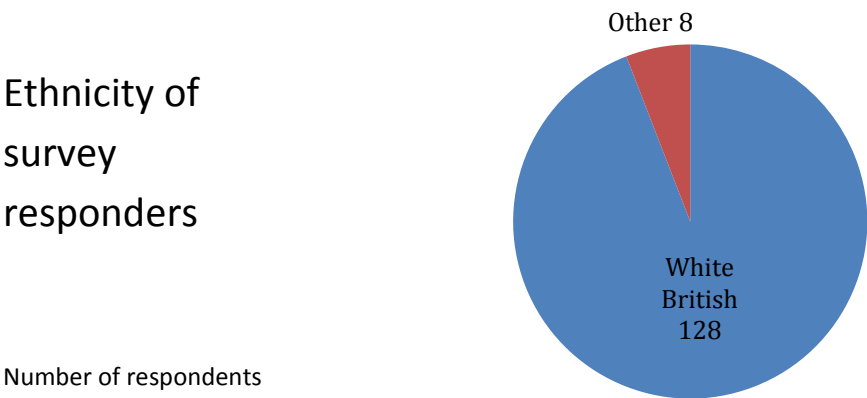
Age of survey responders



Gender of survey responders

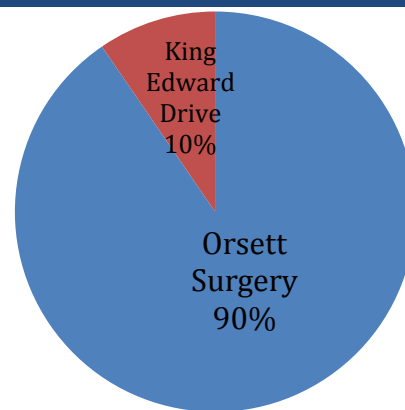


Ethnicity of survey responders

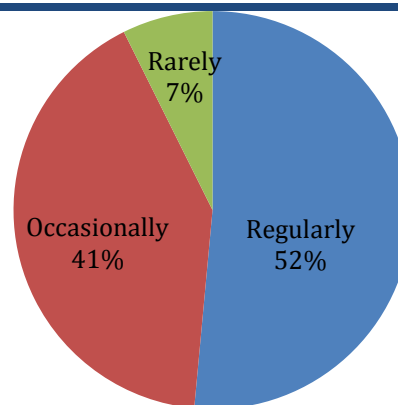


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Which surgery do you mostly attend?

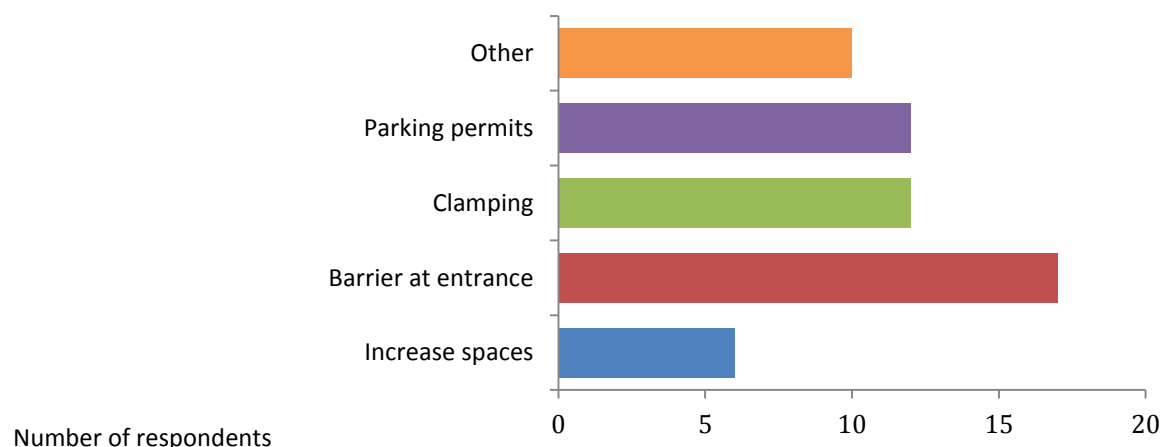


How often do you attend the surgery?



Car park suggestions

In response to patient feedback we have put a new sign at the car park entrance to reduce the amount of non-surgery parking within Orsett surgery. But find that our car park is still often used by hospital patients. We asked our patients "Do you have any other ideas to reduce the parking problem?"

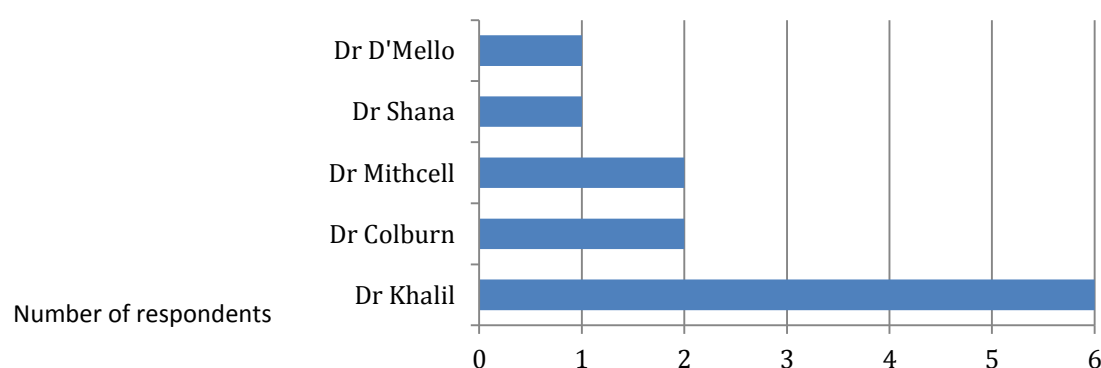


Other suggestions included encouraging the use of public transport; making the car park for staff only; asking the hospital to review their parking arrangements; asking patients to register their cars

# The Surgery, Orsett

## Booking appointments

We asked if patients had experienced difficulty in getting an appointment. 26 patients commented that they had recently experienced problems. The primary cause of delays (12 patients; 46%) was where patients wished to see a specific GP. This graph shows the number of patients who complained about being unable to get an appointment with a particular doctor



Did you know that each doctor has free slots which can be booked when we open each morning?

## Appointment 'free slots'

**63% YES** we know

**37% NO** we don't

Are you aware of the "sit and wait" policy for those patients who cannot wait for a routine appointment and feel they must be seen?

## "Sit & wait"

**39% YES** we are aware

**61% NO** we are not aware

Do you think it would be a good idea to have a display board which advised patients of delays in appointments?

## Waiting time display board

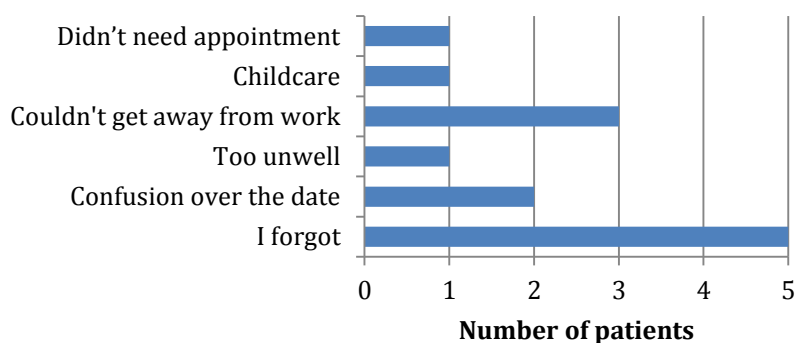
**86% YES** we think it is a good idea

**14% NO** we don't think it is a good idea

# The Surgery, Orsett

## Missed appointments

50 – 60 GP appointments are missed each month. 13 patients told us the reasons they had missed appointments recently



## Speak to Doctor telephone service

We have introduced a 'speak to doctor' service where patients can request a telephone call back from a doctor. Out of the 136 respondents 49 patients reported using this service (36%).

**59%** of the respondents used the service to get GP advice

**29%** of the respondents used the service to obtain test results

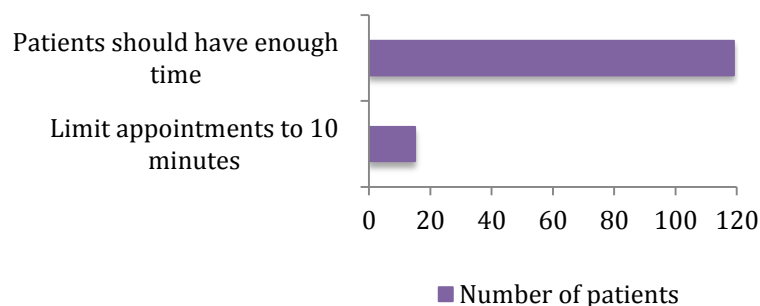
## Test results

**16** patients were aware the GP would call back if a significant test result was obtained

**8** patients preferred to call themselves to check test results

## Length of consultations

In this practice our GPs like to ensure each patient has adequate time, within reason.



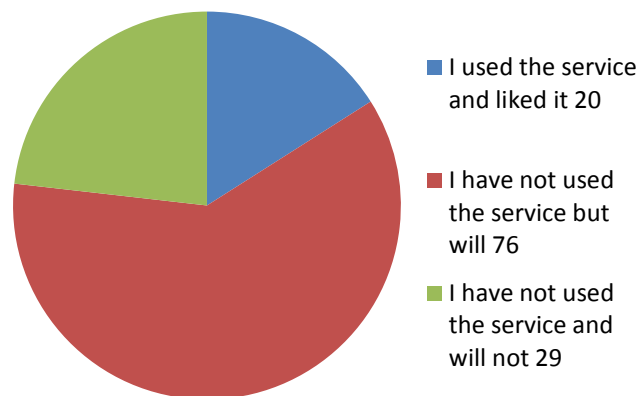
- 10 minute appointments avoid lengthy delays
- If each patient has enough time this sometimes causes delays



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In response to previous patient feedback we have introduced a secure practice email address to order prescriptions

## Repeat prescriptions



Number of respondents

## Patient Participation Group members

20 responders were keen to join our virtual patient participation group and provided email contacts

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## Comments

Some general comments were made regarding wide ranging aspects of the Practice, some of which are noted below to give a flavour of the patient perception of The Surgery, Rowley Road and King Edward Drive Branch Surgery

I think the people that use the surgery are very lucky to have such a wonderful practice

Generally it's quite easy to get an appointment on the day. But trying to get advance appointments has been more difficult

I am always pleased at the service  
I receive at King Edward Drive

I prefer the system there where you just wait to see a doctor, I do not mind if there is a long wait

All I am asked to do is keep calling back

I work full time Mon - Fri 8.30 - 5.30 so improvement towards advance bookings would be great

There are some problems with repeat prescriptions when altered

It is very difficult to get a same day appointment because I am at work by 8.10am and cannot make a phone call at 8.15!

Staff could be more friendly on the phone!

Regularly for general appointments a time of over 5 days is given

My parents doctors surgery have an online appointment booking service

The surgery is not big enough to cope with demand

**This surgery is so much better than my last  
one I am so glad I changed, thank you**

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## Appendix B: Improvement Plan

ISSUE TO BE ADDRESSED	IMPROVEMENT GOAL	KEY ACTIONS REQUIRED	BY WHOM?	BY WHEN?
<i>Which specific area are you going to focus on?</i>	<i>What do you want to achieve?</i>	<i>What needs to be done to achieve the goal? There may be more than one action</i>	<i>Who is responsible for ensuring it happens?</i>	<i>When do you think this will be completed?</i>
Virtual group	Increase number of members	Continue to advertise for new members	Practice Manager	On-going, we will not close membership
Informing patients of late running of surgeries	To provide a board on reception which is updated throughout surgery	Purchase a specifically designed board for this purpose. Train staff in expectations expected of this project	Practice Manager	Next PRG meeting (approx. date October 2013)
Difficulty getting an appointment	Gather more data for discussion	Re-survey patients in more detail	Practice Manager and Receptionists	Next PRG meeting (approx. date October 2013)
Inform patients of key points of patient survey	Making patients more informed	Display on noticeboard for one month	Practice Manager	Summer 2013
Appointment availability	Manage patient DNAs	Staff to talk to patients who miss appointments	Doctors	April 2013
Flexible response to prescription requests	Increase use of online repeat prescribing requests	Continue to promote service	Practice Manager	Ongoing
Building relationships with other PRGs	To visit other PRG meetings and vice versa	Contact local practices to obtain their views on this suggestion	Practice Manager	April 2013