

**Local Patient Participation Report
(Summary of Patient Reference Group Survey 2011/12)**

Summary

We actively participated in the Patient Reference Group initiative for 2011/12. We used the 'virtual' format as we felt we would get as diverse a population as any other medium and also felt that we could build upon previous successful use of the contacts we had to ensure a good response. We had 719 potential members across the two electronic medium. We received 128 replies or 2.6% of our practice population or 17.9% of those we surveyed. We are pleased with the results from the survey, the only area that showed up with any deficiency was telephone access. This dove-tailed nicely with one of the PRG members suggestions to encourage more use of the internet.

Overall we feel this was a good start and we are looking forward to building upon these achievements in 2012/2013.

Members of the Patient Reference Group

We invited the patient list that we had contacts for (430) to be members of the PRG, and in addition we invited our Facebook contacts (289). We are pleased that the age sex profile of those that responded covers all age groups from 18 upwards. we used a poster campaign to recruit members with no internet access, the response was poor. We have made comments in the full report on how we would like to encourage more access to the survey for 2012/13 for those who have no internet access. In addition we have made moves to include or three 'homes' that we look after.

How was the survey constructed

To include the patients priorities and issues an invitation was included with the membership invite for any suggestions. We also used areas from previous surveys such as the doctors interpersonal skills and the national GP survey. We used icontract an online company that we have subscribed to now for 7 years to send our emails and accumulate our data.

Action Plan

The results are we feel very favourable and we have reflected our thoughts in the table below which also looks at individual comments

Survey finding /proposal	Recommendation
<p>ON-LINE ACCESS</p> <p>1. Promote online access. Member suggests that the figures could be increased and emphasises how useful they have found it for booking appointments etc.</p>	<p>1. Encourage more promotion of online access</p> <ul style="list-style-type: none"> • All patients are generated a unique online access code by EMIS and we could look at re-promotion of this benefits are quick and easy access at times that are convenient and also allows freer telephone lines for

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<p>2. Make online access simpler.</p>	<p>those that have no www access.</p> <p>2. Regrets beyond our control EMIS has security features on access we don't control, this is why we spent a number of years on a bespoke system but eventually moved to EMIS access</p>
<p>IN HOUSE CHIROPRACTOR</p> <p>Request for our in house chiropractor appointments to be available online</p>	<p>Regrettably these are not available because they are by invitation only a patient has to be referred to access them.</p>
<p>WELL MAN CLINICS</p> <p>Proactive clinics to discover preventative conditions. Suggestion of paying for this service</p>	<p>Always a great suggestion and we aim to please and provide in this area where we can. We have 94% of our population having had their blood pressure checked in the last 5 years, we know of the smoking status of 87% of our population who are not in a major disease category.</p> <p>We actively participate in the prostate cancer awareness scheme where any man over 50 years can request a PSA and encourage this if they wish once they have received appropriate counselling on an equivocal result.</p> <p>We believe the AAA screening programme is not far off being introduced and we welcome this</p> <p>We have actively encouraged participation in the national bowel screening programme and have taken opportunities to educate and encourage those who have not attended.</p> <p>We have actively participated in the recent initiative of vascular health checks and have had an uptake of 94%.</p> <p>We actively encourage smoke stop for our patients who wish and are ready to stop smoking. We know the smoking habits of 87% of our population over 16. we have a dedicated smoke stop counsellor in the practice.</p> <p>We have 478 patients on our register that can be considered obese (a BMI</p>

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	<p>over 30) over the last 3 years we have actively encouraged this population to have a fasting sugar test to confirm or exclude diabetes. We have been found a large number of people to be diabetic and these have been picked up early prior to their presentation with any symptoms.</p> <p>So whilst no 'formal clinic' is taking place currently as outlined above we have been very active in a proactive way to promote healthy living and detect diseases early where possible.</p>
<p>EXTENDED HOURS</p> <p>1. Would be good for some appointment times for those that work, early/late ones</p> <p>2. why not encourage the elderly or those that don't work to avoid appointments that best suit people who are restricted by employment hours</p>	<p>1. We participate in the Extended Hours access scheme we have surgeries from 7am to 8am on a Thursday morning and a wednesday evening 18:30-19:30 and one Saturday morning a month. We have uptake of these appointments of some 44%. We recognise that the availability of these appointments could be better advertised. They are publicised on our own website and our NHS Choices website</p> <p>Incidentally, however the survey shows the vast majority are satisfied with the opening hours. This may reflect the predominance of the age groups who answered the survey 55-74.</p> <p>2. the extended hours scheme is intended to cover these people. So plan to look at ways of promoting this, perhaps a surgery newsletter in hard copy to all the population. Secondly, look at the behaviour at our own reception with a view to avoiding the later appointments say</p>

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	from 5pm onwards for the elderly.
<p>MENTAL HEALTH</p> <p>Could we have more emphasis on mental health, counselling etc</p>	<p>We agree entirely. We are at the mercies of the community mental health team we have been reorganising it seems for the last 12 years and at the time of writing this report are about to again reorganise. We will look at ways were we can bolster this are within the surgery.</p>
<p>OPENING HOURS AT THE WEEKEND</p> <p>Although there is an out of hours service it would be helpful to have access to pick up prescriptions or for practice nurse appointments at the weekends.</p>	<p>A large area to cover at a weekend, we would need a receptionist, a practice nurse, two members of staff in the dispensary and a doctor. The hours would need to be suitable and worthwhile for all such as 9am to 1pm and presumably each weekend.</p> <p>We do take part in the extended hours scheme for primary care access at a weekend but this is just once a month and there is a doctor alone in the building.</p> <p>To offer anything above this service is not resourced within the GP contract. Secondly and slightly historically we accept but when we did open every Saturday, some 9 years ago now the number of 'customers' was often in single figures.</p> <p>We accept that for a small number of people this weekend access is more suitable but we counter that by having the best access figures not only locally, but in Dorset and nationally in the national GP access survey.</p> <p>The survey reflects that only a small portion of people were quite dissatisfied with our opening hours. Just under $\frac{3}{4}$ of the survey answered no to the question would you like surgery open at additional times.</p>

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<p>TELEPHONE ACCESS</p> <p>The survey shows that over 50% reported that it was only fairly easy or not very easy to get through on phone.</p>	<p>As per the comments above we hope to encourage the online service more to free the phone lines</p>

Action points moving forward into 2013

1. look at re-education of those with www access to use this wherever possible in favour of the telephones, has the advantage of allowing easier access for those with no www
2. incorporate vulnerable groups more directly – interact with staff of residential homes to gain their and their residents views
3. look to further publicising of the extended hours the surgery is open, probable development of a 2012 paper based surgery newsletter that will be made available to all 4790 patients.
4. review our mental health provision at the surgery with the impending community mental health team remodelling.

What opportunity did the PRG get to reflect upon results and action plan

The results and this local patient participation report are available on our website at www.stalbridgesurgery.co.uk.

Practice Opening hours

Routine hours

08:45 – 13:00 & 13:45 – 18:00 Monday to Friday

Extended hours

Every Wednesday evening 18:30 – 19:30

Every Thursday morning 07:00 – 08:00

One Saturday a month 08:30 – 10:00