

PATIENT PARTICIPATION REPORT

2013/14

Practice Code:

C84066

Practice Name:

Daybrook Medical Practice

An introduction to our practice and our Patient Reference Group (PRG)

The practice has approximately 9100 patients. There are 3 partners and 3 salaried GP's at the practice. The practice also employs 3 practice nurses and one healthcare assistant. There is a practice manager, assistant manager and there are 8 receptionists and a secretary. We serve a diverse population covering an area that includes Bestwood Park Estate in the west to Woodthorpe Drive in the east and from Mapperley Plains in the north to Mansfield Rd in the south.

We are a long established practice and the 3 partners have worked together for the last 18 years.

Our patient group has been in existence since 2008 and meet every 6-8 weeks. The membership continues to change and evolve. The PRG take great pride in being able to assist the practice in any way it can to improve patient services and their experience. The doctors are happy to attend the PRG meetings at the request of the PRG to discuss any issues/new services etc the PRG would like to know more about.

The practice and the PRG have become a team over the last few years. The PRG and the input they provide are very much valued by the partners and practice.

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 inc Virtual Group	Difference
Age			
% under 18	20	0	No representation in PRG.

% 18 – 34	22	14.5	Reasonable representation from patients under 35 in PRG
% 35 – 54	26.5	16.5	Reasonable representation in PRG.
% 55 – 74	22	50	This age group over-represented in PRG
% 75 and over	9.5	19	This age group over-represented in PRG

Gender

% Male	49.8	55	Reflects practice list
% Female	50.2	45	Reflects practice list

Ethnicity

% White British	7.3	90	92% of PRG members from one ethnic group.
% Mixed white/black Caribbean/African/Asian	6.25		No representation in PRG
% Black African/Caribbean	0.5		
% Asian – Indian/Pakistani/Bangladeshi	2.5	5	Inadequate representation
% Chinese	0.2		
% Other	1	5	

These are the reasons for any differences between the above PRG and Practice profiles:

The main reasons why the PRG and Practice profiles are so varied is again because we have been unable to attract members from the minority ethnic groups and from the younger age groups represented in the practice list.

Many ethnic groups are represented in our practice list but patients have been unwilling to join the patient group.

In spite of our encouragement, few patients understand the value their input could have in planning and commissioning local health provision.

Many of the under-represented groups are committed to full-time employment and families which unfortunately leaves them little free time to share with their GP practice.

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:

This is what we have tried to do to reach groups that are under-represented:

- Information included in new patient registration packs and discussed at new patient health checks.
- Advertised on the TV screen in the waiting room.
- Included in both the PRG and Practice newsletters.
- There is a section on the practice website devoted to the group.
- We have a message on the Jayex board in the waiting room.
- PRG members approach patients at events held by them at the practice.
- PRG members talk to patients in the waiting room when conducting surveys etc in an effort to try to identify barriers to their taking part.
- We periodically add messages to repeat prescription counterfoils.
- We have written to patients of particular ethnic/age groups who are currently under represented inviting them to take part and have offered translation/interpreter services if required.
- We have varied the time of day meetings take place to enable all groups the opportunity to attend.
- The clinicians have opportunistically asked patients in under-represented groups whether they may be interested in joining.
- The PRG have attended other local PRG meetings to ascertain if they have any other ideas on how to attract under-represented groups and vice versa.
- We have invited patients to join our “Virtual Patient Group” for those patients who would like to have some involvement but not able to commit to regular meetings.
- We have also tried to enlist patients who suffer from long term conditions. We do have 2 members with learning disabilities, who regularly attend meetings with their carers, and their input is valued. We also have a couple of members with long term conditions.
- We continue to have difficulty in attracting new members from the age/ethnicity that would fully reflect our patient list, although a few of our virtual members are in the 18-34 age group. The difficulty in recruiting members of this age group is not uncommon nationally.
- There is easy access to both the building and the meeting room for wheelchair users.
- There are play facilities available for young children should their parents wish to attend.

The group is almost exclusively White/British but we do have a few members outside of this group. As a consequence, the membership of the patient group still does not accurately reflect our patient list and we will continue to try and encourage others to join. However we are happy to maintain a patient group that does not fully reflect the practice list rather than discourage those who are keen to be part of it.

Our PRG work enthusiastically to help and advise us and their continued contribution is much appreciated by the partners and staff.

Setting the priorities for the annual patient survey

This is how the PRG and practice agreed the key priorities for the annual patient survey

Our PRG were consulted at a meeting on 30 July about the issues/items they felt should be included in this year's patient survey. The group looked at the 2012/13 survey and discussed whether there were any points they wished to include once again. Throughout the year the PRG had also been discussing ideas which they would like to include in the 2013/14 survey.

The Virtual Group were also consulted via email.

Following on from last year's survey the PRG agreed that they would like to once again include telephone consultations. A lot of work has been done on this over the last year and the PRG felt it would be useful to get more feedback to see if this was something that could be expanded further.

The PRG also felt we should have a clearer picture of which service patients would contact for non-urgent medical advice when the surgery was closed and how much it cost the practice when they attended A&E.

As many patients still seem unaware that they can book appointments up to 4 weeks in advance and that appointments are available from 7.30am every day the PRG also felt this would be a useful inclusion. On the same subject they felt it would be useful to know how patients preferred to book their appointments, on-line, by phone or in person.

Repeat prescriptions were also discussed and whether these were usually ready for collection by the specified time. The PRG were made aware that a new system was in the pipeline for the practice, but the results from the survey could help in taking that forward.

A couple of members also asked if they could include the question "Are you fed up with surveys?"!

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:

All the ideas above were discussed at a practice meeting in August with the whole practice team and agreed, with the exception of "are you fed up with surveys"

The practice requested that the following questions be included:

Asking patients if they were aware they could also cancel appointments on-line as well as book them.

Prescriptions can be ordered on line, in the surgery and through their chemist.

The practice team were also keen to obtain the patients views on if they felt that the doctors/nurses treated them with respect and in a way that the patient understood.

The PRG were happy for these to be included.

A draft survey was prepared and forwarded to the Virtual Patient Group. Only a couple of the group emailed back and they were in agreement with the proposed questions.

The survey was then once again read through by the PRG and agreed at a meeting on 17 September.

The group had previously agreed to help with distributing survey forms when required.

To summarise, the survey questions had been determined by using the views of the virtual patient group who responded to our requests, those PRG members expressed at group meetings and those of patients approached in the waiting room by PRG members. There had also been input from the practice team.

How our patient survey was undertaken:

The survey was handed out by receptionists throughout the day over a 3 week period in October 2013.

Forms were left on waiting room seats each morning.

Clinicians encouraged patients as they saw them, to complete the survey.

PRG volunteers spent time in the waiting room handing out the surveys, and offering to help with completion if required. They also used this opportunity to highlight the need for new members and discussed how the group functioned.

The survey was also put on the website and e-mailed out to all the virtual members

The survey was posted on the practice website for completion.

In total we received 223 completed surveys – which was an increase of 69 on last year.

Summary of our patient survey results:

The results were collated with the help of our website providers – My Surgery Website, who produced the summary report which included results in pie chart format. The full results are available at the end of this report and on our website: www.daybrookmedicalpractice.co.uk

Analysis of the patient survey and discussion of survey results with the PRG

This describes 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:

The results were circulated to the PRG members prior to a meeting on 12 November.

Q1 69% of patients were aware appointments were available with the doctor and nurse from 7.30am Monday to Friday.

Q2 92% felt these times were useful.

Q3 65% of patients were aware that appointments could be booked up to 4 weeks in advance.

Q4 80% knew appointments can be booked/cancelled on line and that prescriptions could also be ordered on line.

Q5+7 Very few patients were aware of the cost of missed appointments and A&E attendances.

Q6 51% would contact 111 when the surgery was closed for advice, 4% A&E, 39% would attend the Walk in Centre and 6% did not respond.

Q8 The preferred methods of booking appointments were: 32% on-line, 24% in person and 65% by phone (patients given more than one option)

Q9 73% of patients would consider a telephone appointment with the doctor, if appropriate.

Q10 – 13 between 81% and 94% were happy in the way they were treated and consulted by the doctors/nurses.

Q14+15 85% of patients agreed their prescriptions were generally ready within the specified time and the majority of patients were aware of the different options available for ordering of prescriptions.

The PRG were pleased with the increase in completed surveys and hoped this would increase again next year.

The PRG discussed the following areas of the survey in more detail:

Telephone consultations - the group were happy for the pilot to be extended and an audit kept of any patients who needed to be seen subsequently and any comments given by those patients. The practice agreed to carry out an audit and bring the results to a PRG meeting.

Booking in advance – Although more patients are now aware of this facility - 65% - there were still 33% who were not. This 33% are of course now aware. Patient awareness of early and late appointment availability received similar results. The book in advance facility is advertised on the TV in reception, it is on the website and staff regularly informs patients of this. The PRG felt all that could be done has been done other than to regularly include this information in both the Practice Newsletter and the PRG Newsletter. Although the opening hours are very clear the PRG felt the

practice could ensure it was clear that appointments were also available to book at 7.30am. This could be included in the newsletters and amended on the TV screen.

Methods of booking appointments – 32% prefer on-line 24% in person and 65% by telephone. As the majority of patients still prefer to book by telephone it was felt that the number of appointments available for patients to book on-line appeared to be fair. The PRG suggested this could be looked at again in next years' survey to see if demand had increased. If so then the number of appointments available to book in this way may need to be reviewed.

Accessing services out of hours – The PRG felt the results from this question were very promising. It showed that the work that had gone in to informing patients who to contact as first line was working as only 4% of those who answered the question would go to A&E as first choice. The PRG had included information such as this on previous newsletters and felt this had worked well.

The key improvement areas which we agreed with the PRG for inclusion in our action plan were:

1. The PRG felt that they would like to carry on working with the telephone consultations from last year. The sub group had met previously with the practice manager, assistant manager and Dr Gallagher. Other doctors within the practice were now carrying out telephone consultations. It was felt an audit could be carried out on some of the patients who had experience of telephone consultations to see how successful it was. The assistant practice manager agreed to do this.
2. The PRG would also like to look at the repeat prescription process. Although the survey results suggested widespread satisfaction, there is now a new facility available. Electronic Prescribing has been now available at the practice since late November. The PRG would like to help more patients utilise the electronic prescribing as there are lots of benefits to both the patient and the practice. Prescriptions are easily traced, less frustration for the patient when prescriptions go missing and have to be reprinted. The PRG were given copies of sign up forms for patients and felt this was something they could help with and that it linked in well with the survey.
3. The content of messages on the TV screen has already been taken over by the group and this could be used to even greater effect – information on how to register for EPS could be added as well as advertising the use of telephone consultations. The survey results still highlight patients' lack of knowledge of being able to book appointments in advance. However as this is already shown on the tv screen and included in the newsletter and the website the PRG and the practice felt they had gone as far as they could with this, other than highlight the fact that appointments are available to book from 7.30am each morning and to include the information in the Patient Group Newsletter on a regular basis as well as the Practice Newsletter.

4. Methods of booking appointments. The PRG suggested this could be looked at again in next years' survey to see if demand for booking on-line had increased. If so then the number of appointments available to book in this way may need to be looked at.

We agreed/disagreed about:

The practice and the PRG agreed with all the improvement areas to be included in the action plan.

ACTION PLAN

How the practice worked with the PRG to agree the action plan:

The recommendations outlined by the PRG were discussed at a practice meeting on 28 January and the practice agreed they were happy to go ahead with the actions planned.

We identified that there were the following contractual considerations to the agreed actions:
There were none.

Copy of agreed action plan is as follows:

Priority improvement area <small>Eg: Appointments, car park, waiting room, opening hours</small>	Proposed action	Responsible person	Timescale	Date completed (for future use)
Electronic Prescribing Service	Advertise service on in-house TV screen. To make patients aware of the benefits of EPS and increase uptake.	PW (PRG member) – tv screen PRG/Practice	12 wks (as PW currently away) 3-4 months	
Telephone consultations	Audit to be carried out by the practice to check take-up/outcome/satisfaction	Helen Sinclair	6 weeks	March 2014 to be discussed at next PRG meeting.
Opening hours/advance booking	To include information as a standard item in the PRG newsletter.	PRG	On going	
On-line booking of appointments	To include in next year's survey and if uptake/interest has increased to look at number of appointments available to book on line.	PRG/H Sinclair	On completion of 2014/15 survey	

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:

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:

There were no disagreements between the practice and the PRG on changes implemented or not implemented from last year's action plan which was as below:

Set up a facility for the provision of telephone consultations.	A sub group committee was formed and met with 3 times (May/July & October) with GP/PM & APM. A model was formulated and agreed upon.	In the first instance a GP set aside a couple of appointments am and pm for telephone consultations. Once this had been in place 4 weeks the sub group met again to discuss the findings. The PRG sub group members suggested the pilot could be extended slightly and the GP agreed. Receptionists were asked to book in telephone appointments for patients highlighted by the GP.	The telephone consultation pilot is working well and has now been extended. All the partners and salaried GP's now carry out regular telephone consultations. The PRG are happy with the progression so far but would like to expand this further.
Apparent lack of patient knowledge of practice services and facilities.	The PRG have set up their newsletter and are now ready to publish the 4 th edition. The first 3 editions were prepared by a sub group of 3 members and the 4 th now has a new sub group. The first one was published in April 2013.	The PRG have included information on opening hours, booking of appointments, who to contact for non-urgent medical advice when the surgery is closed. Advertised the flu clinics.	The PRG newsletters have been very popular with the patients and the PRG are continually looking at ways in which they can help the practice keep patients up to date with ever increasing changes.

Publication of this report and our opening hours

This is how this report and our practice opening hours have been advertised and circulated:

The results of the survey included in this report have been publicised in the following ways:

- A copy has been displayed on the patient group notice board in the waiting room.
- Hard copies are available upon request.
- Copies have been given to all patient group members.
- Report is available on the practice website: www.daybrookmedicalpractice.co.uk
- Information will be included in both the practice and PRG newsletters advising patients of the availability and locations of the report.
- A copy of this report has been forwarded to our clinical commissioning group: NNE CCG

Opening times

These are the practice's current opening times (including details of our extended hours arrangements)

Monday	07.30 – 19.00
Tuesday	07.30 – 18.30
Wednesday	07.30 – 18.30
Thursday	07.30 - 18.30 (reception manned until 18.30)
Friday	07.30 - 18.30

Telephone lines are open from 8.00 to 18.30 Monday, Tuesday, Wednesday and Friday and from 8.00 to 12.30 on Thursdays.

Outside these hours patients are advised by the answerphone message to either ring 111 or wait to be transferred to the out of hours provider.

Patients can access all services during opening hours by visiting the practice or telephoning 0115 9267628.

Patients can book appointments and request repeat prescriptions by using the Systmonline facility(registration required).

Patients can submit queries and prescription requests via the practice website:
www.daybrookmedicalpractice.co.uk

Patients can send queries or prescriptions by fax to: 0115 9670898

Extended Hours Provision

Extended hours are currently offered every day from 07.30 to 08.00 and on Monday evenings between 18.30 and 19.00.

GP appointments are available during all these times and nurse appointments are available during the morning sessions.

Daybrook Medical Practice

Daybrook Medical Practice Survey 2013

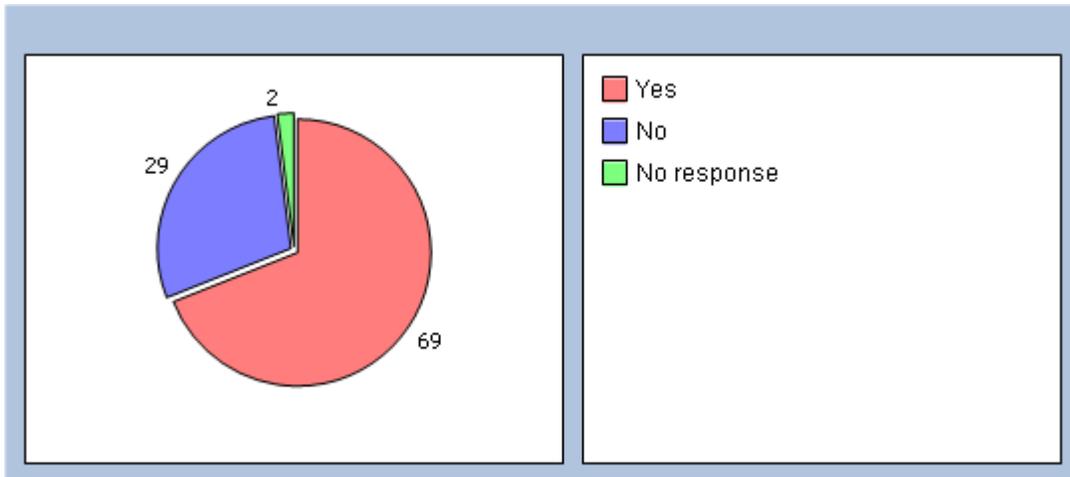
Number of Responses: **223**

Q1. Are you aware appointments are available with the doctor or nurse from 7.30am Monday-Friday and one late night per week?

Yes **69%**

No **29%**

No response **2%**

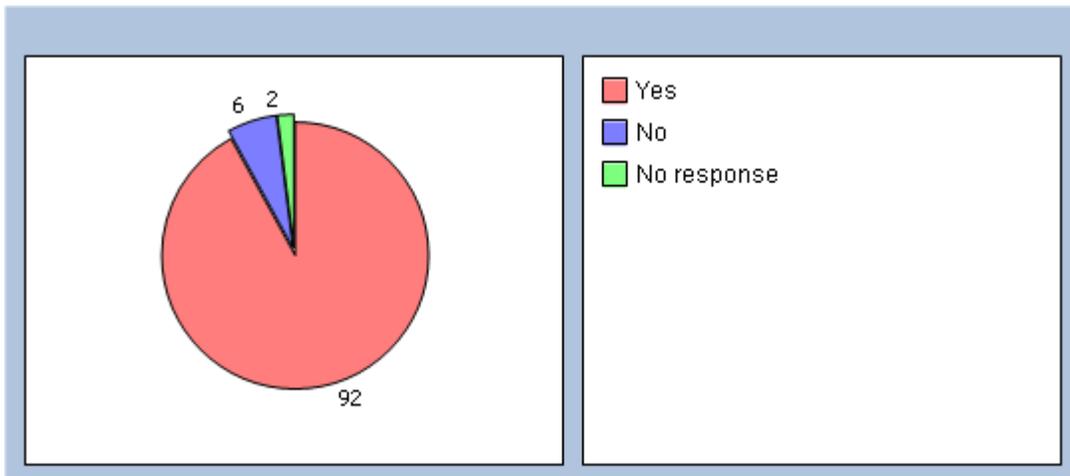


Q2. Do you feel these times are useful?

Yes **92%**

No **6%**

No response **2%**

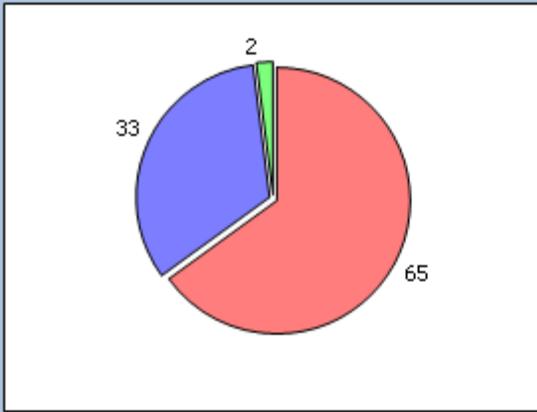


Q3. Did you know appointments with the doctor and nurse can be booked up to 4 weeks in advance?

Yes **65%**

No **33%**

No response **2%**



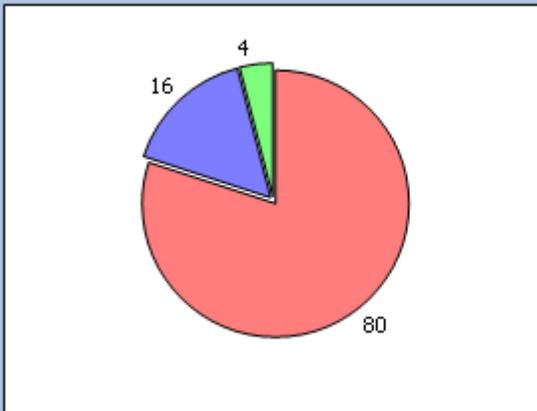
Yes
No
No response

Q4. Are you aware the practice has a website at: www.daybrookmedicalpractice.co.uk where you can book or cancel appointments and requests prescriptions?

Yes **80%**

No **16%**

No response **4%**



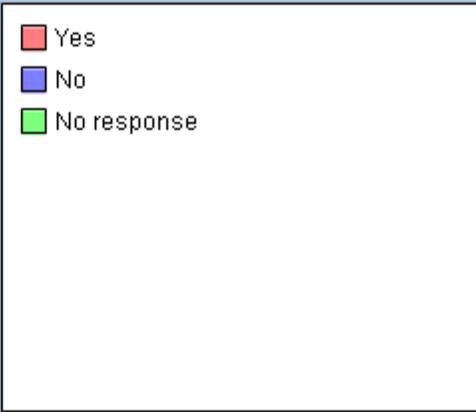
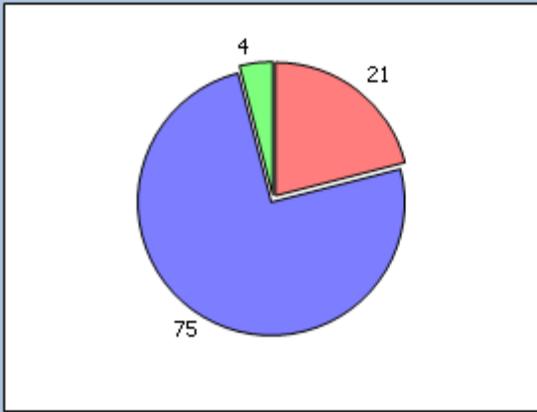
Yes
No
No response

Q5. Did you know that the cost of a missed about is around £67.00?

Yes **21%**

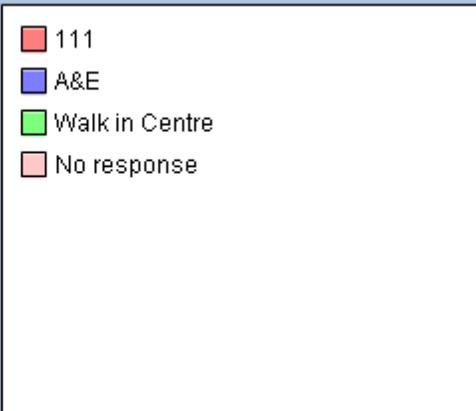
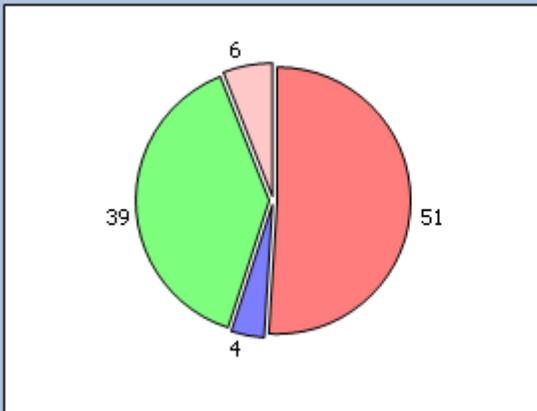
No **75%**

No response **4%**



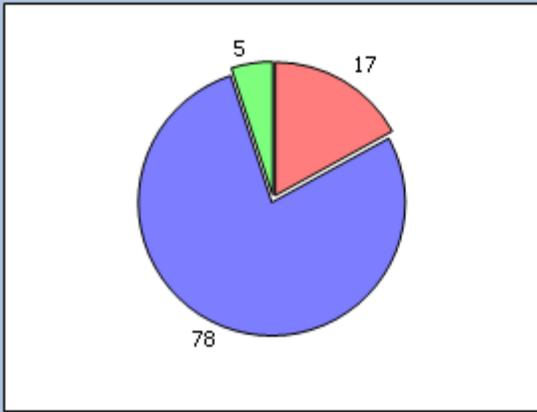
Q6. If the surgery was closed who would you contact if you required non urgent medical advice?

111 **51%**
 A&E **4%**
 Walk in Centre **39%**
 No response **6%**



Q7. Are you aware that if you attend A&E this costs between £67-£150?

Yes **17%**
 No **78%**
 No response **5%**



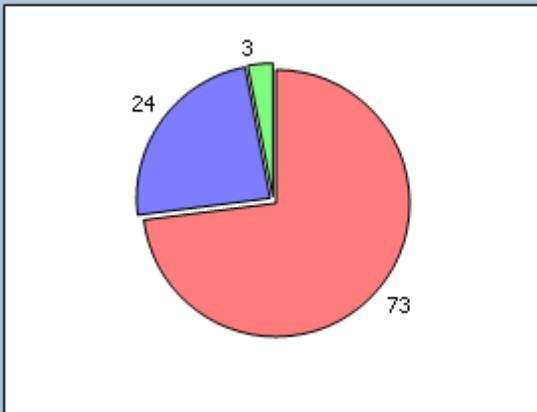
■ Yes
■ No
■ No response

Q8. What method would you prefer to be able to book your appointments?

On-line **32%**
 In person **24%**
 By phone **65%**

Q9. If you phoned for an appointment with the doctor and were offered the option of having a telephone consultation rather coming to the surgery is this something you would consider?

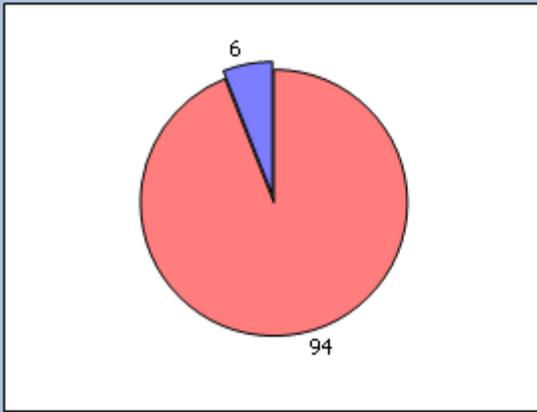
Yes **73%**
 No **24%**
 No response **3%**



■ Yes
■ No
■ No response

Q10. Do you feel the doctors/nurses treat you with dignity?

Yes **94%**
 No **0%**
 No response **6%**



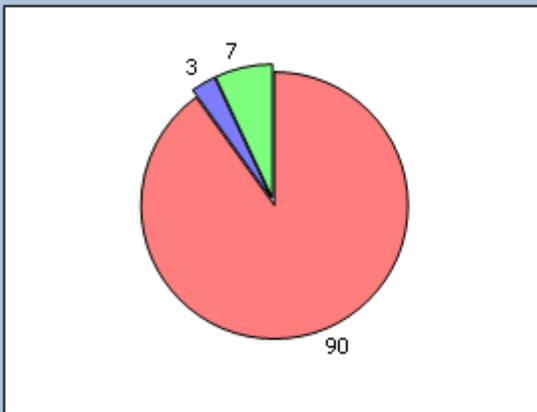
Yes
No response

Q11. Do the doctors/nurses speak to you in a way that is easy to understand?

Yes **90%**

No **3%**

No response **7%**



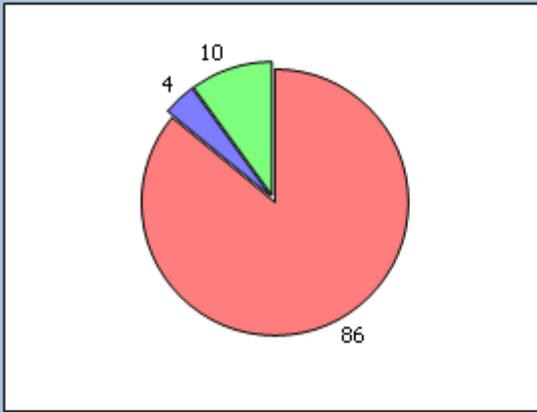
Yes
No
No response

Q12. Do the doctors/nurses involve you in deciding how to handle the problem(s) you discussed?

Yes **86%**

No **4%**

No response **10%**



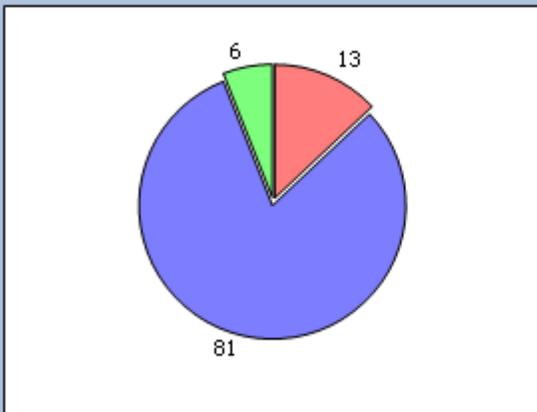
Yes
No
No response

Q13. Do you feel rushed during your consultation with the doctor/nurse?

Yes **13%**

No **81%**

No response **6%**



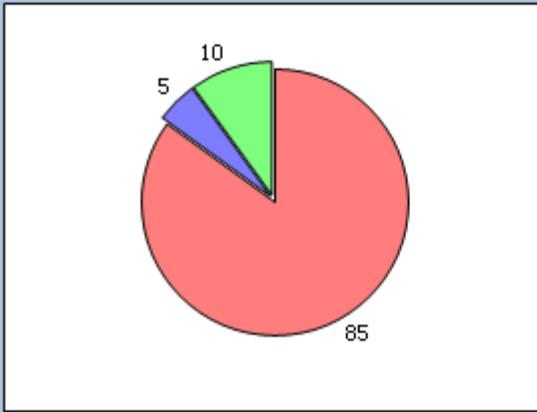
Yes
No
No response

Q14. In general are your rprescriptions ready within the specified time?

Yes **85%**

No **5%**

No response **10%**



■ Yes
■ No
■ No response

Q15. Are you aware prescriptions can be ordered in the following way?

In surgery **89%**

Via the website **64%**

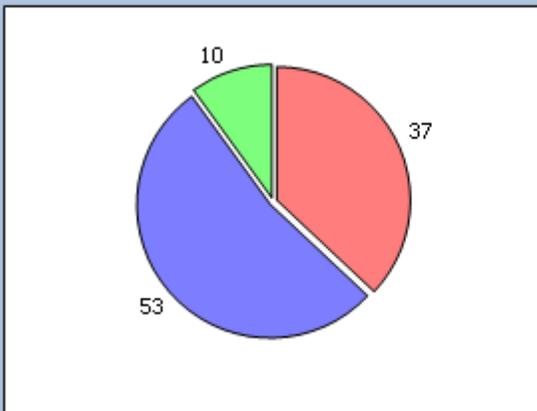
Through your chemist **63%**

Q16. Are you?

Male **37%**

Female **53%**

No response **10%**



■ Male
■ Female
■ No response

Q17. Are you?

Under 18 **0%**

18-24 **3%**

25-34 **11%**

35-44 **11%**

45-54 **13%**

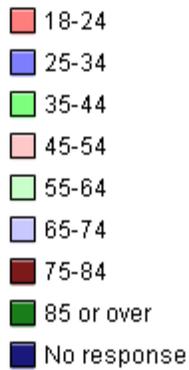
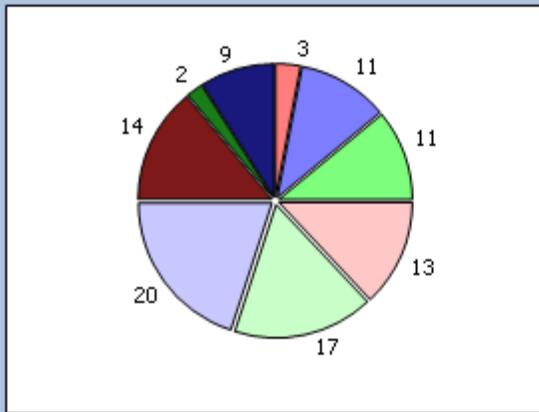
55-64 **17%**

65-74 **20%**

75-84 **14%**

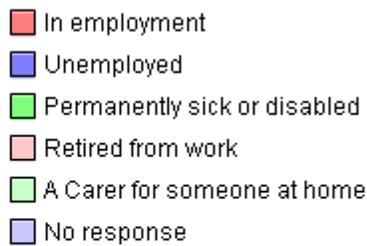
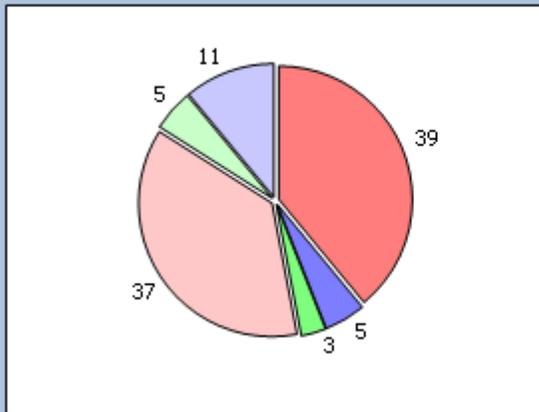
85 or over **2%**

No response **9%**



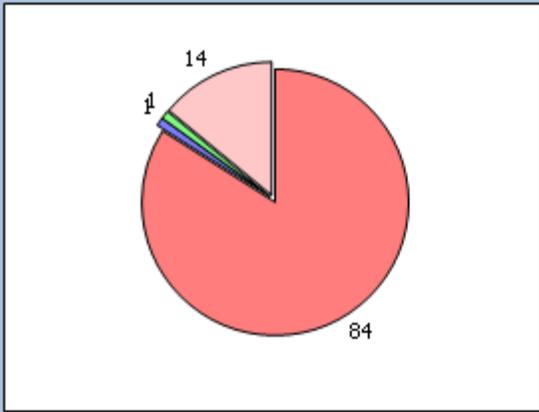
Q18. Are you?

In employment **39%**
 In full time education **0%**
 Unemployed **5%**
 Permanently sick or disabled **3%**
 Retired from work **37%**
 A Carer for someone at home **5%**
 No response **11%**



Q19 Which is the ethnic background with which you most identify with?

White British **84%**
 White Irish **1%**
 Mixed White & Black Carribean **1%**
 Mixed White & Black African **0%**
 Mixed White & Black Asian **0%**
 Indian **0%**
 Pakistani **0%**
 Bangladeshi **0%**
 Black Carribean **0%**
 Black African **0%**
 Chinese **0%**
 Other **0%**
 No response **14%**



- White British
- White Irish
- Mixed White & Black Carribean
- No response

Please add any other comments you may have about Daybrook Medical Practice.

Many thanks for taking the time to complete this survey.

Daybrook Medical Practice