

Patient Participation report 2011-2012

To be read in conjunction with the Practice Survey Questionnaire, Practice Survey results and comments.

Component one – establishing a Patient Reference Group

Brookside Group Practice has been running a Patient Participation Group (Critical Friends Group) since 2004. This group meets quarterly and has been of mutual benefit to the Practice and to the patients; the Practice has used the group as a sounding board to discuss development plans and patient education projects; and the group members have fed back on patient experience issues and worked together with the practice in finding solutions to them.

The group currently consists of 7 patients and is attended by 2 GPs and 3 managers. The patients are of different ages, there are 4 male and 3 female group members who also reflect the ethnic mix of the Practice.

As a large Practice we have also decided to start a Patient Reference Group (PRG). We aim for it to be a large virtual group (using email or post) which can give input via questionnaires and where participants may also come from particular interest groups – e.g. a carer, mental health, elderly etc. This group would help us gain views of a greater number of our patients without them committing to a big investment of time for attending meetings. From August 2011 we have been advertising the PRG to patients in our waiting rooms via posters, newsletters and information slides on TV screens; we have had 23 responses so far. We have also written to 5 local groups. These included a drug and alcohol charity, mental health group, social club for those with disabilities and a children's centre asking them to display posters and hand out forms to their contacts who may be interested in joining the PRG. We are unsure as to why the response has been relatively low but we continue to advertise this so that patients can join in the future. If we have a particular area that comes to light in a Critical Friends meeting then we would plan to advertise the PRG widely to a target group e.g. if an issue relating to elderly care comes up we will ask for those in a certain age group if they would be willing to give their feedback by joining the group.

Component Two

At our Critical Friends Group meeting in June we discussed the Practice Survey. We have been using the GPAQ survey at the Practice for many years and were delighted to be able to ask our patients about issues that relate to our Practice. In discussion with the Critical Friends Group a draft survey was created with the main areas being appointments, patient information, consultations with GP or practice nurse, medication, and general comments. This was then reviewed by members of the group, going through five drafts until they were happy that the survey questions were clear for patients to understand. A number of issues were taken into consideration when drafting the survey, such as making sure questions were not leading or biased and what the aim of each question was to ensure the collected data was useful and satisfied the questions we had as a group. The survey was relatively long - 38 questions - but it was comparable in length to the GPAQ survey which we had been using since 2003 and have always had a good return rate (80% or above).

Component Three

During the last two weeks of August and first week of September 500 Practice surveys were handed out to patients who came for appointments with both GPs and practice nurses at all of our three sites. Surveys were also sent, in the post and by email, to those patients who had joined our PRG. Although the population representation is biased toward those who came into the Practice

during the 3 week period, or who had already signed up for the PRG the number of surveys given out was approximately 2% of the Practice population which gives a confidence interval of 4 on a confidence level of 95%. Where the questions were similar to the GPAQ survey from previous years the results were also comparable to the national GP-Patient survey results we have received in the past.

The survey results and comments were collated.

Component Four and Five

The results and comments were discussed at the next Critical Friends Group meeting in September 2011. The discussion was interesting and very positive and many of the actions were for the Practice to ensure that patients were aware of services and information available to them. The agreed action plan was:

Action plan:

- continue to advertise Patient Reference Group to patients
- continue to advertise benefits of seeing usual GP.
- the practice to look into emergency clinic times and appointment spread throughout the day
- advertise text reminder service
- turn off text confirmation service and see if this is positive in not confusing patients
- positively advertise DNA figures
- Waiting Room Group to assess patient info displayed in waiting areas, and make sure staff are aware of the info for patients
- advertise online prescription request and chemist collection service
- make CFG photo board, informing patients to direct comments to reception

This action plan was then published in the winter newsletter to patients (December 2011) and published onto the Practice website.

Actions completed and in process:

- continue to advertise Patient Reference Group to patients – on going with posters, newsletters and in the waiting room loop and on website. Also written to local schools to ask if there are interested students who would like to join the group.
- continue to advertise benefits of seeing usual GP- article in winter newsletter (newsletter is also available on practice website) and on the waiting room loop.
- the practice to look into emergency clinic times and appointment spread throughout the day- medical staff group are considering this at present.
- advertise text reminder service – continue to do on waiting room loop and newsletter and with all new patients who register at the Practice
- turn off text confirmation service and see if this is positive in not confusing patients – this has been done, patients were finding the service confusing and there has not been any feedback from patients that they have missed the service.
- positively advertise DNA figures – this will be done in the February loop and Spring newsletter.
- Waiting Room Group to assess patient info displayed in waiting areas, and make sure staff are aware of the info for patients – this has been done in Nov 2011 and only relevant information returned to the boards.
- advertise online prescription request and chemist collection service- done in newsletter and on-line and on the loop.
- make CFG photo board, informing patients to direct comments to reception- being done in January 2012.