

St George's Medical Centre
Dr A M Botros
Report of St George's Patient Participation Group
YEAR 2 2012 to 2013

Step 1: Develop a structure for a patient reference group (PRG)

We have had our PPG represented group since year 1 (2011 to 2012), but as decided by the group they would like to invite new comers to the group. As our advertisement was on continues period through out both years we managed to invite more patient to the group with the help of the current PPG group. We advertised within the practice via posters in waiting area, on LCD screen and on our practice website to recruit more members to join the existing Patient Participation group. We have contact forms and leaflet of PPG Why leaflet at reception and on our practice website for patients to complete and submit their interest. All staff both clinical and non clinical staff approached patients directly by word of mouth for their interest. We were looking for patients from different ethnic groups and different age group to participate, as our practice population has various ethnic group registered. Below is a table with the different ethnic and age group patients registered with the practice and the opening hours?

Practice Population

	Total males	Total females	Total both sexes
Practice Population	1682	1532	3214
Indian/British Ethnic Group	19%	22%	21%
Pakistani/British Pakistani 2001cens	6%	4%	5%
Other Asian Ethnic Group	24%	19%	21%
Other Black Ethnic Group	20%	22%	21%
Somali Ethnic Group	11%	10%	10%
British Ethnic Group and other White	6%	9%	7%
White and Black African	1%	1%	1%
White and African Caribbean Ethnic Group	3%	4%	4%
Ethnicity not stated	10%	8%	10%

Population Age Group

Age groups	0-4	05--16	17-24	25-34	35-44	45-54	55-64	65-74	75-84	85-89	90+
Males	135	307	189	276	302	237	119	62	43	10	2
Females	110	339	153	245	255	159	86	76	68	22	19

Opening Hours

Monday	8.30 AM – 8.15 PM – extended hours
Tuesday	8.30 AM - 6.30 PM
Wednesday	8.30 AM - 1.30 PM
Thursday	8.30 AM - 6.30 PM
Friday	8.30 AM - 6.30 PM

Our PPG consists of 12 members from different ethnic groups and different age groups as described below. We have also managed a virtual email group where patients can post their suggestions toward the PPG group.

The group consists of the following ethnic group and ages

Ethnic Group	Age Group
British Ethnic Group and other White	30 – 80
White and African Caribbean Ethnic Group	
Somali	
Other Asian Ethnic Group	
Indian/British	

All attendances were given our practice leaflet which had the services provided by practice the opening hours and out of hours contact details

Step 2 Agree Areas of Priority with the PRG

We had our first PRG meeting on the 11.10.12. PRG had the opportunity on what they would like on the patients questionnaire survey for this year. And all agreed the following:-

- Access to Doctor and /or Nurse
- Obtaining repeat prescription
- Obtaining test results
- About staff
- Overall satisfaction
- Aware of website
- Aware of online prescriptions

The PRG requested that the survey should have a maximum amount of questions and to make them as simple as possible. Practice Manager will take responsibility in preparing the Questionnaire and have available from November 2012 for 6 weeks. Questionnaire will be uploaded on our practice website for all patients to complete and submit and also be handed out at reception. All completed surveys will be anonymous and patients put in a box outside reception desk clearly marked Patient Survey. Once the survey will be completed Varsha will audit the outcome and discuss in next meeting that will take place on the 14.03.2013.

The PRG also agreed the following Action Points for the practice:-

Agreed Action Points and Outcome for meeting held on 11 October 12

1. **New introduction on maternity booking** – no need to be referred by GP. Patients can contact Ealing Hospital directly – **Outcome - Added posters in waiting area. Introduced to all new pregnant patients by Doctor and Nurse.**
2. **Conducting Health check** - for all patients between the age of 45 to 74 without any exiting medical conditions – **Outcome – 500 invitation letter was sent out to all patients within the criteria to book an appointment with the nurse to carry out the checks. By the end of February 2013 we screened about 200 patients**
3. **Late attendance:** - increases patient waiting time to see Dr and Nurse– **Outcome – any patient more than 15 minutes late will have to book another appointment or will have to wait at the end of the surgery to be seen added message on electric Message screen in waiting area - one problem per appointment, as each consultation with the Doctor is for 10 minutes maximum. Receptionist advice to Patients at the time of booking appointment if a double appointment if needed.**
4. **Review new appointment system** – introduced From 1st August 12. – **Outcome – Advertised on website and in waiting area.** Reception discussed with all patients that booked and appointment. This has minimised the complaints for appointments by about 80%.
5. **Email/Text:** To provide the surgery with patient’s email address so relevant updated information regarding the St George’s Medical Centre can be sent out – **Outcome – receptionist got consent from patients and all those who agreed were given a short form to update email address and mobile numbers**

Step 3: Collate views of Patients via a local Practice Survey

(Audit handouts given to all attendance – please refer to **Appendix 1**)

A Survey Audit was conducted between November and January 2012/2013 with a total of 75 patients completing the survey.

Regarding the opportunity of speaking to a Doctor or Nurse on the telephone when necessary 45 patients stated that it was good to excellent. Patients need to bear in mind that they need to call before 10am on the same day to arrange the telephone consultation with Doctor.

Late attendance/waiting time: Attendees of the meeting stated that the waiting time has significantly cut short; evidence from the Patient Survey stated that 55 out of 75 stated that the “length of time patient had to wait for an appointment” ranged from good to excellent. One reason to why patients wait so long is before they did not press ‘ok’ stated on the arrival machine, this is crucial. Another reason is that more than one problem is explained by the patient at one consultation, when the policy is **one problem per appointment**, as each consultation with the Doctor is for 10 minutes maximum. If more time is needed then this must be stated to the receptionist at the time of booking an appointment.

Choice of Doctor - We had a satisfaction positive feed back from patient who have the opportunity to chose which Dr they would prefer to see.

In obtaining a repeat prescription on time, 53 patients have stated that it was very good to excellent. We would like to stress that the Practice policy is 48 hours for a prescription to be ready and not to except anything less.

In obtaining test results only 2 patients out of 75 found it poor regarding “were you told when to contact us for your results”. Patients need to give the clinicians 1 week for the results to be finalised. Dr Botros added on by saying “it is the patient’s responsibility to contact the surgery for their test results.

Pre-booking appointment creating lots of DNA (did not attend)

Practice Website -43 out of 75 now about practice website and

Online Prescription – 45 out of 75 now how to order prescription online.

Step 4 and 5: Discuss and 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.

The following action points were agreed by the PPG on the 14th March 2013 meeting based on the outcome of the survey:

DNA – did not attend: With the introduction of pre-booking, there has been an increase of DNA. In order to tackle this we will provide visual aids such as posters to state the significance of not attending an appointment without giving 24 hrs notice of cancellation by actually stating the number of appointments missed by patients for Doctors and Nurses.

Contact details: As a General Practice Surgery our aim is to help you the best we can as a team, working with patients to provide the best medical service possible.

Unfortunately this is quite difficult to do when up to date email and contact numbers/addresses are not provided to the GP. Although we had provided a small form to complete to update contact number and email addresses, we will have problems of reaching patient. Therefore, we shall provide visual aids and reception staff will enquire with patients face to face.

Test Results – Varsha will create a word document hand out sheet to remind patients to contact the surgery to obtain their test results with time limitation on when to call. Dr discussed with the group that it is the patient’s responsibility to contact the surgery for their test results.

Website and Online prescription – To get more patients to access website and complete their prescriptions online

Change of carpet in waiting area – as part of the Care Quality Commissioning (CQC) practice will be assess and audited on health and safety and infection control for both patients and staff.

On the 14.03.13 we had a meeting with the PRG to discuss the outcome of the patient survey and discussed the action points and how the practice has made changes to improve the services. An open discussion was made with the PRG and whether any further actions need to be taken. Handouts were given to all PRG members for the patient survey audit results.

STEP 6: PUBLICISE THE RESULTS AND AGREED ACTION PLAN

All the Reports, minutes of meeting, patient survey audit and action plans have been publicised on our practice website: www.stgeorgesmedicalcentre.co.uk for all patients to access.