

Shadwell Medical Centre



Dr RK Potts Dr JM Sager Dr DA Stocks Dr IA Bargh

Patient Participation Report 2011/12

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2. Profile of members of Patient Participation Group

a) Patient Participation Group

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[END]

1. Introduction

a) Establishment of Patient Participation Group

This year the practice chose to take part in the 2 year Directed Enhanced Service for Patient Participation and now boasts a positive partnership with the newly created patient group to be known as Shadwell Medical Centre PPG.

The group is made up of practice staff and patients. The meetings are attended by a GP Partner and Melanie Keane, Practice Manager. If it is deemed appropriate by either Melanie/GP Partner or the patient representatives, other members of the practice team will be asked to attend meetings as and when required.

Whilst our meetings have been low in attendance we continue to grow, and we shall continue to promote the group in various ways and have no short term plans to suspend the recruitment campaign. It is through the continuation of promotion using various media available to the group that we hope to reach those patient groups who have been identified as not being currently represented.

As our group is in its' infancy, we have not yet appointed Board members and until such time as they are elected the group "Terms of Reference" and "Code of Conduct" have not been agreed. However, during the initial meeting, it was emphasized that this was not a forum for discussion of personal issues or grievances, but is the opportunity to help and share potential improvements to patient care and services.

2. Profile of members of Patient Participation Group

a) Patient Participation Group

The patient group is open to all patients who are registered at Shadwell Medical Centre. Our patient group currently has 13 members, some of whom attend meetings and some who only wish to attend on an ad-hoc basis dependant on the agenda items. The demographics of the group are as follows:

5 Male members and 8 Female members.

Age Groups. 40yrs – 50yrs	1
51yrs – 60yrs	4
61yrs – 70yrs	5
71yrs – 80yrs	2
81yrs – 90yrs	1

The ethnic backgrounds of the group members are as follows:

12 are recorded as British / Mixed British
1 is recorded as Indian / British Indian

Our patient representatives are from various cultural backgrounds and have a variety of health needs.

b) Steps taken to ensure cross section of practice community is representative of registered patients

To date we have advertised our patient group in practice using posters (**Appendix 1**), and by word of mouth, on our website and Melanie has spoken to patients who had previously shown an interest in the practice before the group was set up. Melanie has also taken the opportunity of speaking to some patients who had previously complained about services at the practice. Some patients had shown a keen interest in becoming a member of the group but felt that they would not be able to commit enough time to it for them to make a valuable contribution. These patients have been told that they can commit as much or as little time as they wish. Some of these patients are giving further consideration as to whether they still wish to join the group.

c) Identification of patient categories not represented and steps taken to engage

The practice has 6084 patients. The age profile of our patients can be found in (**Appendix 2**). The practice realise that presently the group is not a true representative group of the practice population but are continuing to advertise the group through the above mentioned means. It has been noted that it is difficult for some patient groups to attend meetings depending on the time and location of the meetings. The practice will endeavour to hold meetings at various times of the day so as not to disadvantage any patient wishing to join the group. The practice is keen to engage patients from the following groups:

- Young people (school age)
- Young Families

- Carers
- Patients from other ethnic backgrounds other than British / Mixed British
- Middle aged people with and without families

The practice have sent letters to some patients in the above groups asking them if they wish to join the group but thus far there have been no responses.

During the last group meeting several members put forward suggestions as to how we can communicate to the wider practice community. These ideas included advertising through the Local Parish Council, having a small article in the local weekly newspaper, displaying a poster at the Local Schools and Community Centres, text messaging, using the in house TV and to continue to advertise on the practice website. Melanie will prepare further advertising materials for use within these areas. The practice already has a dedicated notice board for the Patient Group, however the practice agree that it needs to be in a more predominant position and will endeavour to do this as soon as possible.

3. Reaching agreement on issues to include in practice patient Surveys

Prior to the first Patient Group meeting Melanie contacted those patients who had shown an interest in attending the meeting to discuss a potential patient questionnaire. The questionnaire was a draft copy of the Local Clinical Commissioning Group Patient Questionnaire. This was explained to the prospective group members individually and they were asked to read through the document, record any comments, questions or suggestions as to the suitability of the document for use within the practice. The first patient group was held on 19 December 2011. Meeting notes can be found at **Appendix 6**. Melanie presented the meeting with the draft copy of the Local Clinical Commissioning Group Patient Questionnaire again and asked the attendees for comments. There were many comments and suggestions about the document and all were taken into account when the Local Practice Questionnaire was put together. The final questionnaire included questions about, Access, Clinical Care, Services, Information and Advice and Quality of Service.

Each attendee from the meeting was sent a draft copy of the Local Practice Questionnaire. Once the final comments had been addressed the questionnaire was agreed by the group. (**Appendix 3**)

4. Practice Patient Surveys 2011/12 - How the views of registered patients were sought

The practice decided to choose an ad-hock week in which to target every patient who attended surgery. It was thought that opportunistic contact, would access a good cross section of patient groups within the practice. The practice felt that using a random sample of patient views reflects the accuracy of the patient groups attending surgery. Questionnaires were sent by post to any patient who made contact with Melanie during the same week and it was also posted on the practice website. During the period of the distribution of the questionnaire additional clinics were running at the surgery including, Antenatal, Diabetes and NHS Health Checks.

5. Practice Patient Surveys - our findings

In total 215 questionnaires were distributed of which 175 were returned giving a response rate of 81%. The results are shown in (**Appendix 4**).

6. Development of Action Plans

Following the Patient Group meeting on March 21 2012, (meeting notes can be found at **Appendix 7**) when the results of the Patient Questionnaire were discussed, there was a clear response from the group that they wished the practice to concentrate on the access problems in the surgery as a priority area. However, the emphasis was on initially addressing the high DNA (Did not Attend) rate at the practice. The practice was also asked to consider addressing the problems the group were reporting about the attitude of some staff. An action plan has been drawn up to facilitate the practice responses to the Patient Group requests. The action plan will be further discussed during the next group meeting where it is expected that there will be additional areas of work to concentrate on. (**Appendix 5**). Evaluation of the actions taken will be reviewed on an ongoing basis.

7. Surgery opening times, GP availability & extended hours arrangements.

Shadwell Medical Centre is open 5 days a week offering appointments between 8 am and 6 pm. Patients are welcome to attend surgery or contact us by telephone regarding any concerns and for advice regarding their health. The practice also provides extended hours surgeries which are held on alternate Monday and Wednesday evenings. The surgery remains open until 8pm on these nights. Two doctors are available during extended hours.

The following table indicates the individual Doctor's normal working days and the times appointments are available. These days and times may change when doctors take annual leave.

	Dr R K Potts	Dr J M Sager	Dr D A Stocks	Dr I A Bargh
Monday am	8:00 – 11:00	Not available	08:00 – 11:00	09:00 – 12:00
Monday pm	14:30 – 17:30	Not available	Not available	14:30 – 17:30
Monday late night (alternate weeks)	Not available	Not available	18:30 – 19:30	18:30 – 19:30
Tuesday am	09:00 – 12:00	10:00 – 13:00	Not available	09:00 – 12:00
Tuesday pm	14:30 – 17:30	14:30 – 17:30	Not available	14:00 – 17:00
Wednesday am	08:00 – 11:00	9:00 – 12:00	08:00 – 11:00	Not available
Wednesday pm	14:00 – 17:00	14:00 – 17:00	Not available	Not available
Wednesday late night (alternate weeks)	18:30 – 19:30	18:30 – 19:30	Not available	Not available
Thursday am	08:00 – 11:00	09:00 – 12:00	Not available	10:30 – 13:30
Thursday pm	13:30 – 14:30 (baby clinic) 15:00 – 17:00	14:30 – 17:30	Not available	14:30 – 17:30
Friday am	Not available	09:00 – 12:00	08:00 – 11:00	09:00 – 12:00
Friday pm	Not available	14:30 – 17:30	14:00 – 17:00	14:00 – 17:00
	8 clinical sessions	8 clinical sessions	4 clinical sessions	8 clinical sessions

Shadwell Medical Centre



Dr RK Potts Dr JM Sager Dr DA Stocks Dr IA Bargh

Would you like to help shape the way Shadwell Medical Centre develop services for its patients?

Shadwell Medical Centre

Patient Participation Group

IF INTERESTED IN JOINING THIS NEW GROUP, PLEASE EXPRESS YOUR INTEREST IN WRITING TO

MRS M. KEANE, PRACTICE MANAGER

Appendix 2

Age Range	Male	Female	Total
0 – 65	2496	2446	4942
66 – 75	260	291	551
76+	255	336	591
Total	3011	3073	6084

Shadwell Medical Centre



Dr RK Potts Dr JM Sager Dr DA Stocks Dr IA Bargh

PATIENT QUESTIONNAIRE

2011/2012

Dear Patient

We are keen to try and improve the service we offer to you our patients.

Your comments are very important because they will be used to help us develop a better service for all of you.

We would therefore be grateful if you could spare 10 minutes to tell us what you think of our service and what changes you would like to see.

Please answer the questions on the following pages by ticking the appropriate box or use the space provided to give us your comments. Any information you provide will be kept confidential.

Thank you very much for helping us to help you.

Section One: Access to our services

In this section we're trying to get an idea of how people feel about accessing this practice's services.

How often do you use the practice?

- Every week
- Every month
- Every few months
- Once a year
- Less than once a year

Other (please state)

.....
.....
.....

Non Urgent Appointments

How easy do you find it to book a non-urgent appointment with a *doctor*?

- Very easy Easy Difficult Very difficult

How easy do you find it to book a non-urgent appointment with a *nurse*?

- Very easy Easy Difficult Very difficult

How do you normally book an appointment to see a doctor or nurse?

- In person By telephone Get someone else to book for you

Other (please state)

.....
.....

How could we make it easier to book an appointment?

.....
.....

Urgent Appointments

When you last wanted to book an urgent appointment with the doctor/nurse were you able to do so?

- Yes No Can't remember

If you couldn't get an urgent appointment why do you think this was?

- There were no appointments available
- The appointment times offered were not suitable
- The appointment was not with my usual doctor or nurse
- There was another reason (please state)

.....
.....

How easy do you find it to cancel or rearrange an appointment?

- Very easy Easy Difficult Very difficult Don't know

How could we make it easier for you to cancel an appointment?

.....
.....

If you have been cared for by any of the following healthcare professionals in the last year please tell us what you thought of the overall care you received. Please only tick those that are relevant.

	Excellent	Very good	Good	Poor	Very poor	Not used
District nurse						
Community midwife						
Health visitors						
Health care assistant/worker						
Specialist nurses						
Specialist GP service (e.g. diabetes or dermatology)						
Community physiotherapist						
Occupational therapist						
Intermediate care team						

Do you find the premises easy to access?

- Very easy Easy Difficult Very difficult

Section Two: Information and Advice

The information that people have access to is really important in helping them to manage their health. We want to find out what you think of the information we provide to patients and what we should do differently.

How do you feel about the information we currently provide to you?

Very happy Happy Not very happy Very unhappy No Comment

How do you feel about the methods we use to provide this information?

Method used	Very happy	Happy	Unhappy	Very unhappy	Have not used this service	Don't know about this service	Would like this service (if currently not available)
Information from the doctor or nurse							
Television screen							
Health leaflets							
Check in screen							
Notice board							
Website							
Other (please state)							

What kind of information and advice would you like to be able to access in this practice?

- Information to help me manage my own health condition
- General advice such as support for stopping smoking and weight loss
- Practice information such as the services available and opening times
- Information about other local health services
- Other (please state)

.....

Do you feel that you have enough opportunity to give feedback, raise concerns and complaints or make suggestions?

Yes No Unsure (If unsure please give reasons)

.....

Section Three: Quality of service

We believe that providing high quality services is vitally important to our patients. Please tell us what you think of our services.

Please tell us how much to agree or disagree with the following statements. Please tick ONE box for each statement.

Statement	Always	Most of the time	Sometimes	Rarely	Never	Not relevant
I am treated with dignity and respect at my GP practice						
My personal values and beliefs are respected by my GP practice						
The receptionist/administrator was polite and helpful						
I was worried because other people could overhear me talking to the receptionist						
I felt bothered or threatened by other patients						
The doctor or nurse listens to me						
I feel that the doctor or nurse has all the information they need to treat me						
The doctor or nurse talks in a way that helps me understand my condition and treatment						
I am confident in the doctor or nurse's ability to treat me						
I have enough time with the doctor or nurse						
I am treated with dignity and respect by the receptionist						

How do you feel about being involved in decisions about your care?

- I am more involved than I want to be
- I am involved as much as I want to be
- I am not involved enough
- I do not want to be involved

Regular/Acute Medicines

Have you been prescribed any medicines by your GP in the past 12 months?

- Yes No Unsure

Were these medications

- Regular medications Acute (NEW) medications

If you have been prescribed medicines within the last 12 months please answer the following statements. Please tick ONE box for each statement.

Statement	Always	Most of the time	Sometimes	Rarely	Never	Not relevant
I know enough about what my medicines are for						
I know enough about how and when to take my medicines						
I know enough about possible side effects of my medicines						
I would know what to do if I had any problems with my medicines						

What/How could we improve the information with regards to your personal medication?

.....

.....

Section Four: About you

We need a little bit of information about you so we can work out where things are working and for whom. We also need to know where there are areas for improvement.

Are you:

Male Female

What is your age?

Under 21 22 – 25 26-35 36-45 46-55 56+ over 70

You do not have to answer the next few questions but your responses will help us to identify any specific needs some patients may have. All data will be kept strictly confidential.

Do you have a long-term health condition? These are sometimes called chronic diseases and include asthma, COPD, heart diseases, liver and kidney diseases or any other ongoing illness.

Yes No

Do you consider yourself to be disabled?

Yes No

If “yes”, what type of impairment?

- Physical impairment Sensory impairment
- Mental health condition Learning disability
- Long-standing illness/health condition
- Rather not say

Ethnic origin:

- White
- Dual ethnicity
- Asian or Asian British
- Black or Black British
- Other ethnic groups

(Please specify – e.g. Chinese,).....

Thank you once again for your help

Appendix 4

Section One: Access to our services

In this section we're trying to get an idea of how people feel about accessing this practice's services.

How often do you use the practice?

Every week **4%**

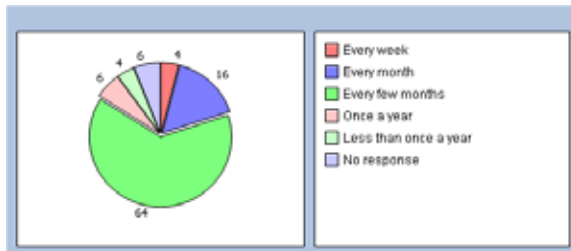
Every month **16%**

Every few months **64%**

Once a year **6%**

Less than once a year **4%**

Other – see separate comments **Appendix 5**



Non Urgent Appointments

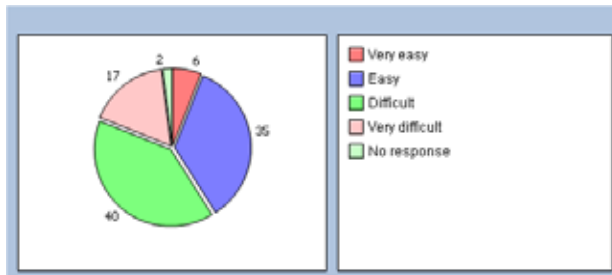
How easy do you find it to book a non-urgent appointment with a *doctor*?

Very easy **6%**

Easy **35%**

Difficult **40%**

Very difficult **17%**



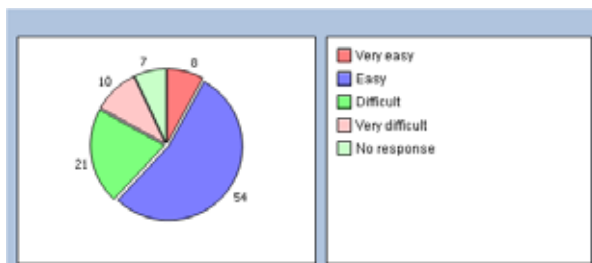
How easy do you find it to book a non-urgent appointment with a *nurse*?

Very easy **8%**

Easy **54%**

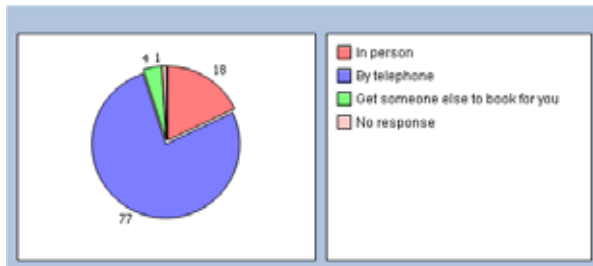
Difficult **21%**

Very difficult **10%**



How do you normally book an appointment to see a doctor or nurse?

In person **18%**
By telephone **77%**
Get someone else to book for you **4%**
Other – see separate comments **Appendix 5**



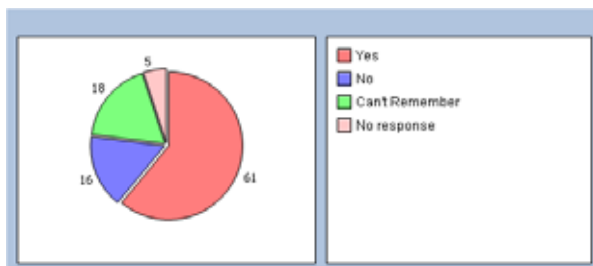
How could we make it easier to book an appointment?

See separate comments **Appendix 5**

Urgent Appointments

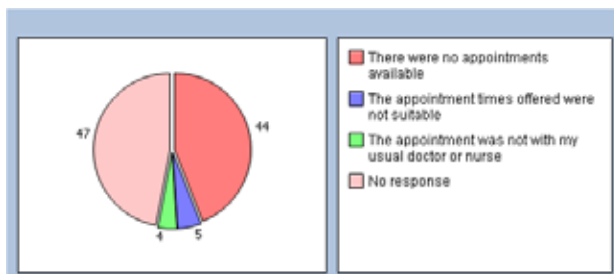
When you last wanted to book an urgent appointment with the doctor/nurse were you able to do so?

Yes **61%**
No **16%**
Can't Remember **18%**



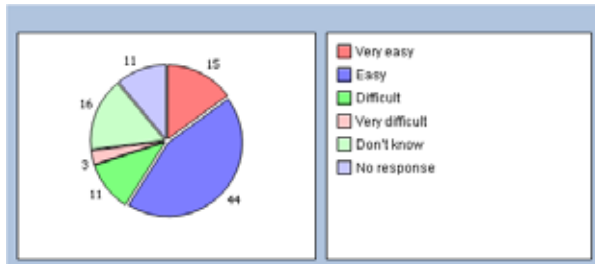
If you couldn't get an urgent appointment why do you think this was?

There were no appointments available **44%**
The appointment times offered were not suitable **5%**
The appointment was not with my usual doctor or nurse **4%**
There was another reason – see separate comments **Appendix 5**



How easy do you find it to cancel or rearrange an appointment?

Very easy **15%**
 Easy **44%**
 Difficult **11%**
 Very difficult **3%**
 Don't know **16%**



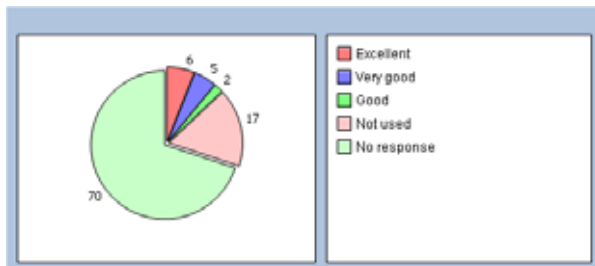
How could we make it easier for you to cancel an appointment?

See separate comments **Appendix 5**

If you have been cared for by any of the following healthcare professionals in the last year please tell us what you thought of the overall care you received.

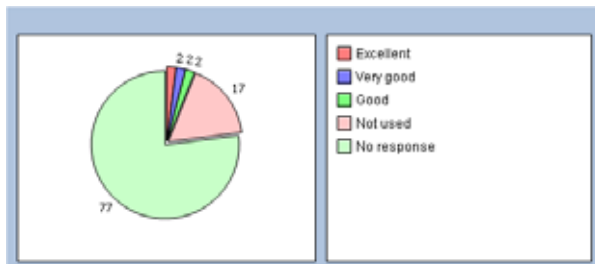
District nurse

Excellent **6%**
 Very good **5%**
 Good **2%**
 Poor **0%**
 Very poor **0%**
 Not used **17%**



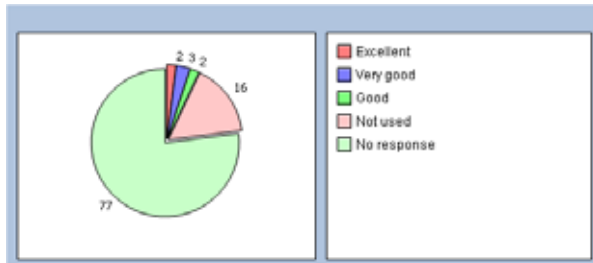
Community midwife

Excellent **2%**
 Very good **2%**
 Good **2%**
 Poor **0%**
 Very poor **0%**
 Not used **17%**



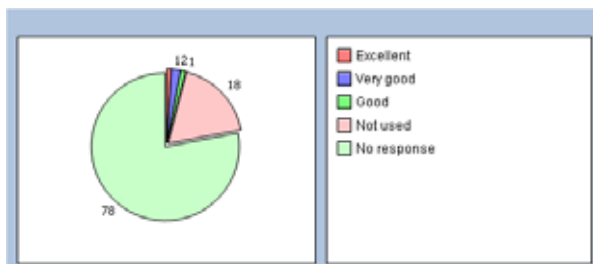
Health visitors

Excellent **2%**
Very good **3%**
Good **2%**
Poor **0%**
Very poor **0%**
Not used **16%**



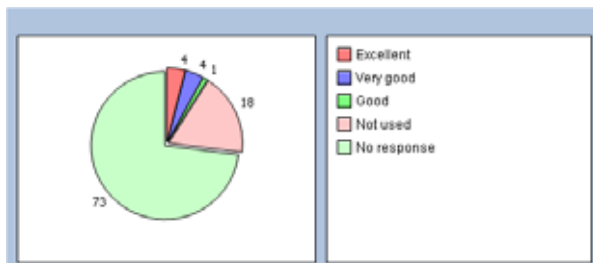
Health care assistant/worker

Excellent **1%**
Very good **2%**
Good **1%**
Poor **0%**
Very poor **0%**
Not used **18%**



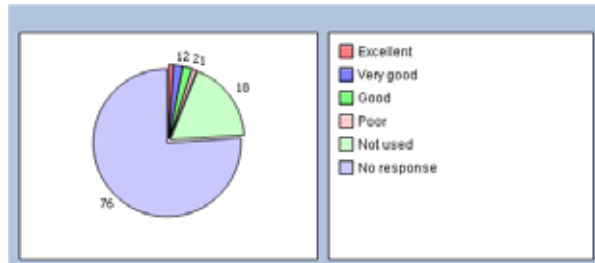
Specialist nurses

Excellent **4%**
Very good **4%**
Good **1%**
Poor **0%**
Very poor **0%**
Not used **18%**



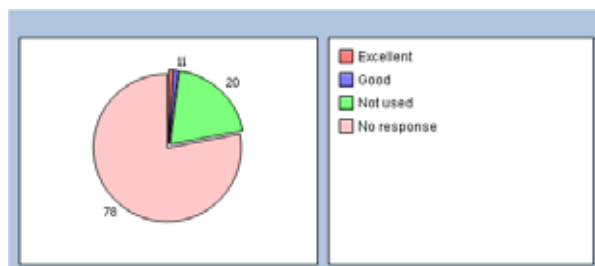
Specialist GP service (e.g. diabetes or dermatology)

Excellent **1%**
Very good **2%**
Good **2%**
Poor **1%**
Very poor **0%**
Not used **18%**



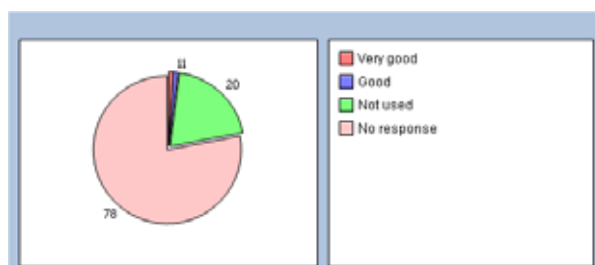
Community physiotherapist

Excellent **1%**
Very good **0%**
Good **1%**
Poor **0%**
Very poor **0%**
Not used **20%**



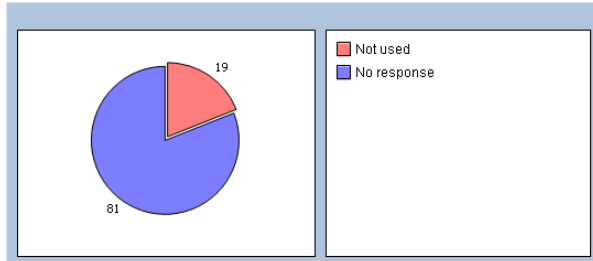
Occupational therapist

Excellent **0%**
Very good **1%**
Good **1%**
Poor **0%**
Very poor **0%**
Not used **20%**



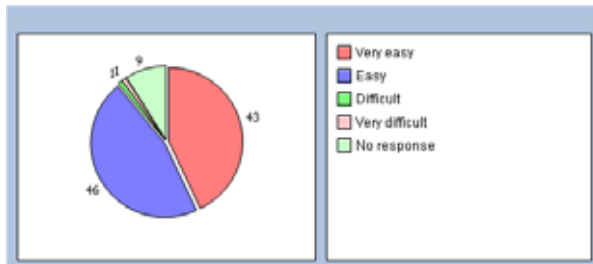
Intermediate care team

Excellent **0%**
Very good **0%**
Good **0%**
Poor **0%**
Very poor **0%**
Not used **19%**



Do you find the premises easy to access?

Very easy **43%**
Easy **46%**
Difficult **1%**
Very difficult **1%**

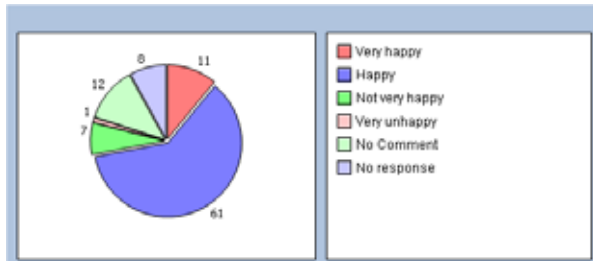


Section Two: Information and Advice

The information that people have access to is really important in helping them to manage their health. We want to find out what you think of the information we provide to patients and what we should do differently.

How do you feel about the information we currently provide to you?

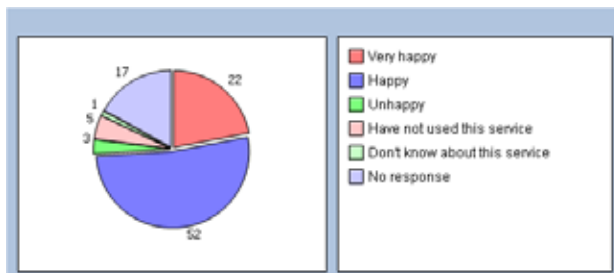
Very happy **11%**
Happy **61%**
Not very happy **7%**
Very unhappy **1%**
No Comment **12%**



How do you feel about the methods we use to provide this information?

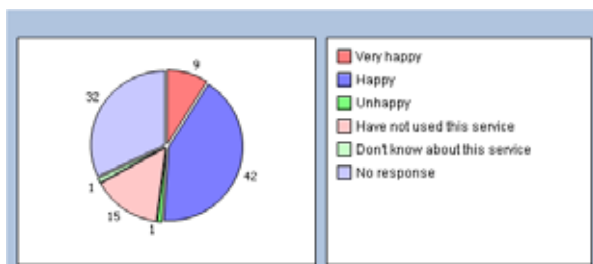
Information from the doctor or nurse

Very happy **22%**
Happy **52%**
Unhappy **3%**
Very unhappy **0%**
Have not used this service **5%**
Don't know about this service **1%**
Would like this service (if currently not available) **0%**



Television screen

Very happy **9%**
Happy **42%**
Unhappy **1%**
Very unhappy **0%**
Have not used this service **15%**
Don't know about this service **1%**
Would like this service (if currently not available) **0%**



Health leaflets

Very happy 8%

Happy 38%

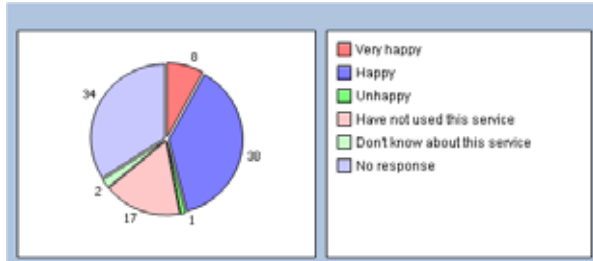
Unhappy 1%

Very unhappy 0%

Have not used this service 17%

Don't know about this service 2%

Would like this service (if currently not available) 0%



Check in screen

Very happy 25%

Happy 42%

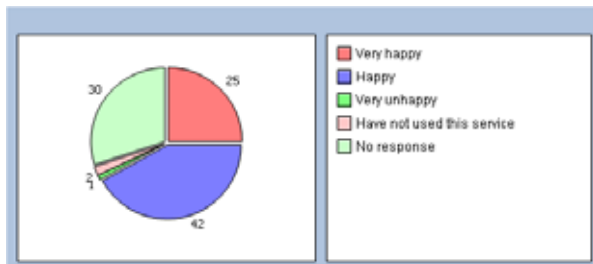
Unhappy 0%

Very unhappy 1%

Have not used this service 2%

Don't know about this service 0%

Would like this service (if currently not available) 0%



Notice board

Very happy 6%

Happy 36%

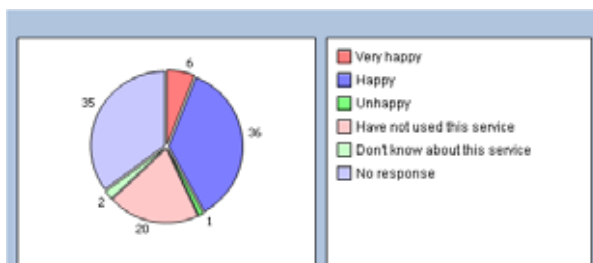
Unhappy 1%

Very unhappy 0%

Have not used this service 20%

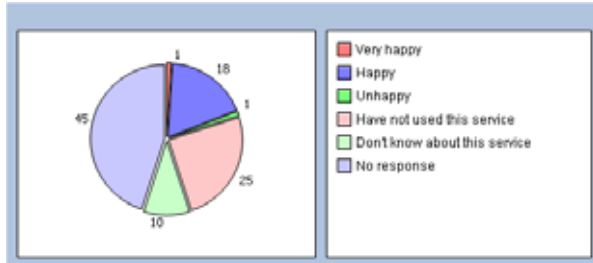
Don't know about this service 2%

Would like this service (if currently not available) 0%



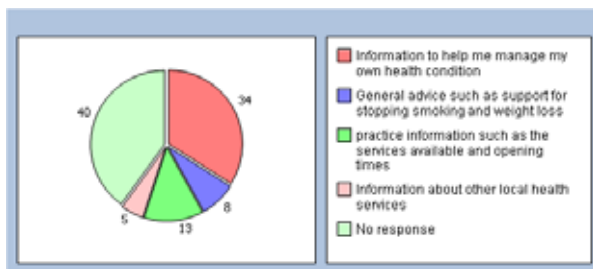
Website

Very happy **1%**
 Happy **18%**
 Unhappy **1%**
 Very unhappy **0%**
 Have not used this service **25%**
 Don't know about this service **10%**
 Would like this service (if currently not available) **0%**



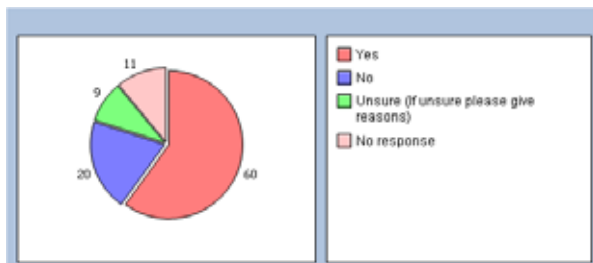
What kind of information and advice would you like to be able to access in this practice?

Information to help me manage my own health condition **34%**
 General advice such as support for stopping smoking and weight loss **8%**
 practice information such as the services available and opening times **13%**
 Information about other local health services **5%**
 Other – see separate comments **Appendix 5**



Do you feel that you have enough opportunity to give feedback, raise concerns and complaints or make suggestions?

Yes **60%**
 No **20%**
 Unsure (If unsure please give reasons) **9%**
 see separate comments **Appendix 5**



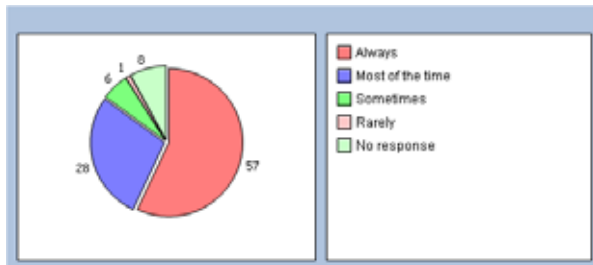
Section Three: Quality of service

We believe that providing high quality services is vitally important to our patients. Please tell us what you think of our services.

Please tell us how much to agree or disagree with the following statements. Please tick **ONE** box for each statement.

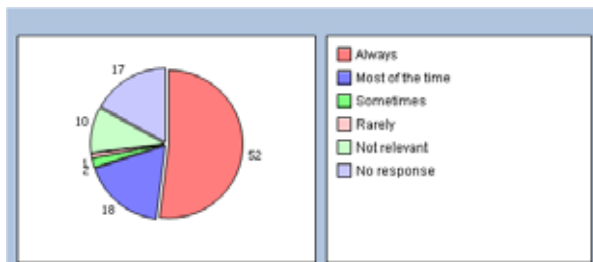
I am treated with dignity and respect at my GP practice

Always **57%**
Most of the time **28%**
Sometimes **6%**
Rarely **1%**
Never **0%**
Not relevant **0%**



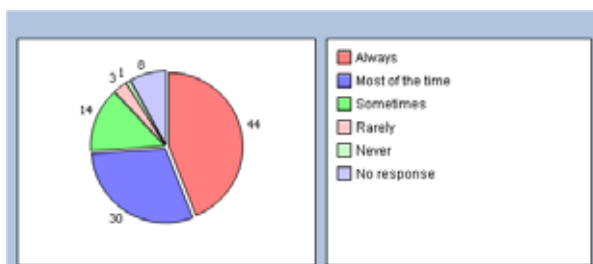
My personal values and beliefs are respected by my GP practice

Always **52%**
Most of the time **18%**
Sometimes **2%**
Rarely **1%**
Never **0%**
Not relevant **10%**



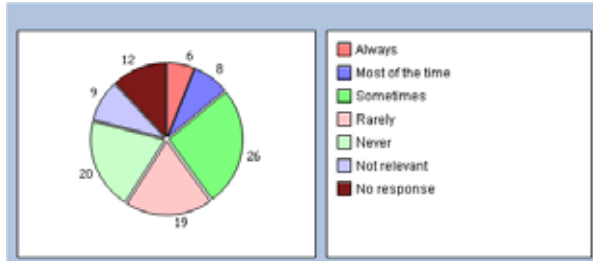
The receptionist/administrator was polite and helpful

Always **44%**
Most of the time **30%**
Sometimes **14%**
Rarely **3%**
Never **1%**
Not relevant **0%**



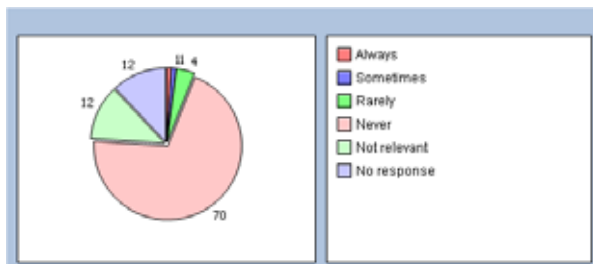
I was worried because other people could overhear me talking to the receptionist

Always **6%**
Most of the time **8%**
Sometimes **26%**
Rarely **19%**
Never **20%**
Not relevant **9%**



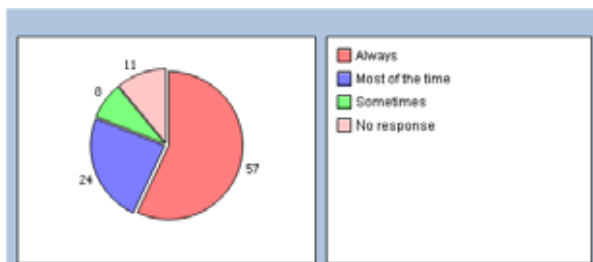
I felt bothered or threatened by other patients

Always **1%**
Most of the time **0%**
Sometimes **1%**
Rarely **4%**
Never **70%**
Not relevant **12%**



The doctor or nurse listens to me

Always **57%**
Most of the time **24%**
Sometimes **8%**
Rarely **0%**
Never **0%**
Not relevant **0%**



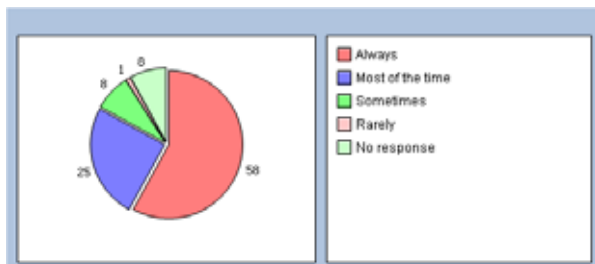
I feel that the doctor or nurse has all the information they need to treat me

Always **56%**
Most of the time **28%**
Sometimes **8%**
Rarely **0%**
Never **0%**
Not relevant **0%**



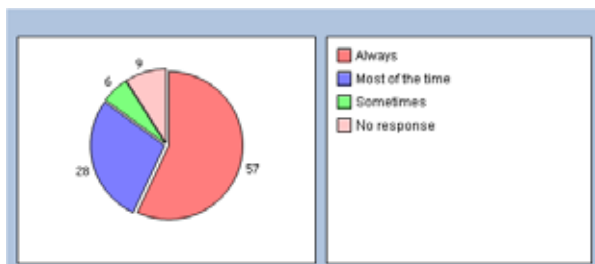
The doctor or nurse talks in a way that helps me understand my condition and treatment

Always **58%**
Most of the time **25%**
Sometimes **8%**
Rarely **1%**
Never **0%**
Not relevant **0%**



I am confident in the doctor or nurse's ability to treat me

Always **57%**
Most of the time **28%**
Sometimes **6%**
Rarely **0%**
Never **0%**
Not relevant **0%**



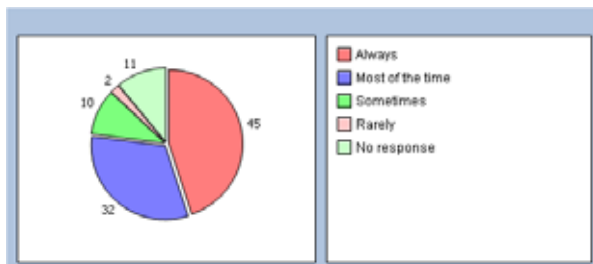
I have enough time with the doctor or nurse

Always **49%**
Most of the time **33%**
Sometimes **8%**
Rarely **1%**
Never **0%**
Not relevant **0%**



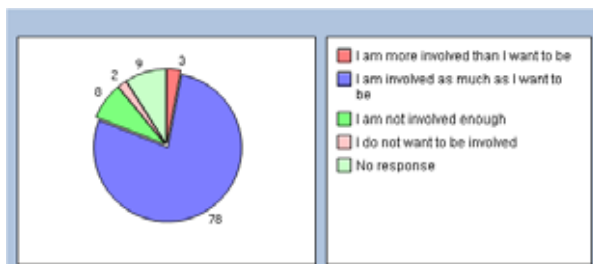
I am treated with dignity and respect by the receptionist

Always **45%**
Most of the time **32%**
Sometimes **10%**
Rarely **2%**
Never **0%**
Not relevant **0%**



How do you feel about being involved in decisions about your care?

I am more involved than I want to be **3%**
I am involved as much as I want to be **78%**
I am not involved enough **8%**
I do not want to be involved **2%**



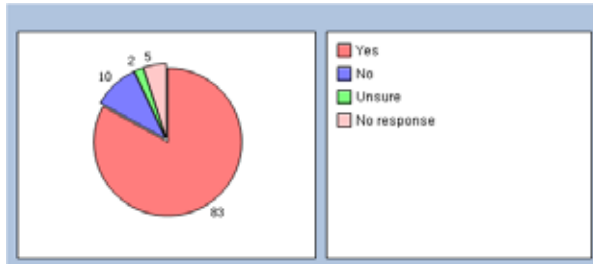
Regular/Acute Medicines

Have you been prescribed any medicines by your GP in the past 12 months?

Yes **83%**

No **10%**

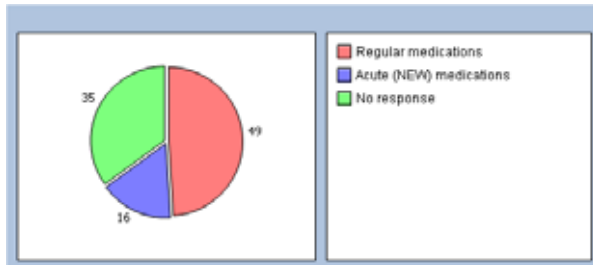
Unsure **2%**



Were these medications

Regular medications **49%**

Acute (NEW) medications **16%**



If you have been prescribed medicines within the last 12 months please answer the following statements.

I know enough about what my medicines are for

Always **61%**

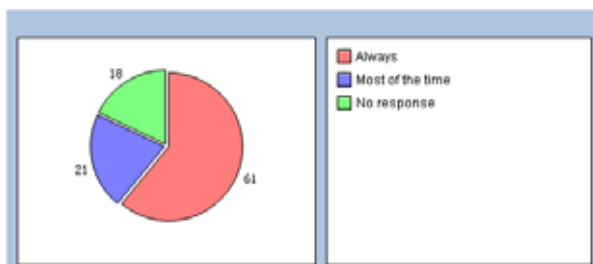
Most of the time **21%**

Sometimes **0%**

Rarely **0%**

Never **0%**

Not relevant **0%**



I know enough about how and when to take my medicines

Always **72%**

Most of the time **12%**

Sometimes **0%**

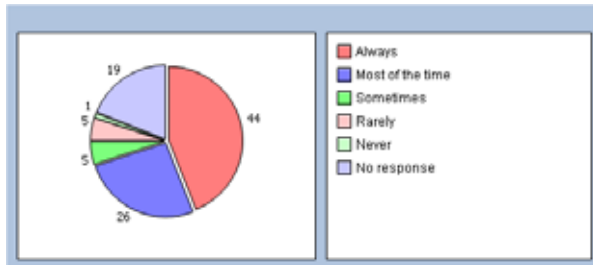
Rarely **0%**

Never **0%**

Not relevant **0%**

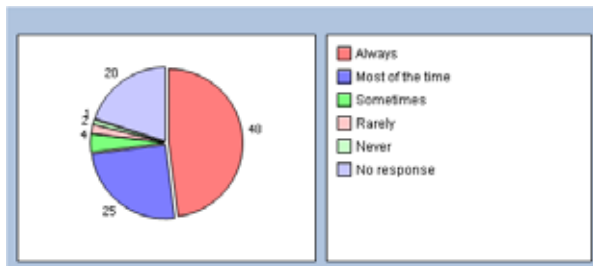
I know enough about possible side effects of my medicines

Always **44%**
Most of the time **26%**
Sometimes **5%**
Rarely **5%**
Never **1%**
Not relevant **0%**



I would know what to do if I had any problems with my medicines

Always **48%**
Most of the time **25%**
Sometimes **4%**
Rarely **2%**
Never **1%**
Not relevant **0%**



What/How could we improve the information with regards to your personal medication?

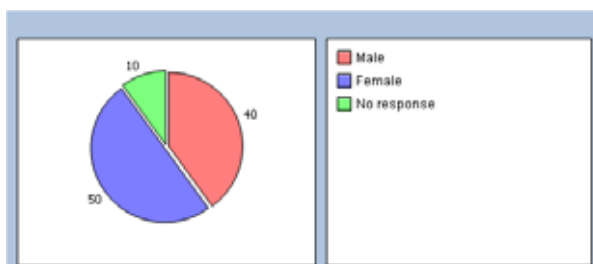
See separate comments **Appendix 5**

Section Four: About you

We need a little bit of information about you so we can work out where things are working and for whom. We also need to know where there are areas for improvement.

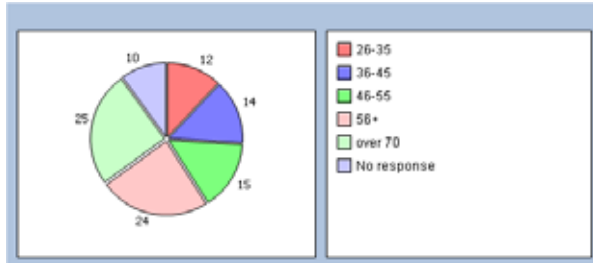
Are you:

Male **40%**
Female **50%**



What is your age?

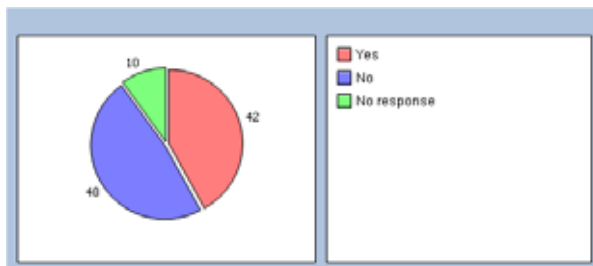
Under 21 **0%**
22 – 25 **0%**
26-35 **12%**
36-45 **14%**
46-55 **15%**
56+ **24%**
over 70 **25%**



You do not have to answer the next few questions but your responses will help us to identify any specific needs some patients may have. All data will be kept strictly confidential.

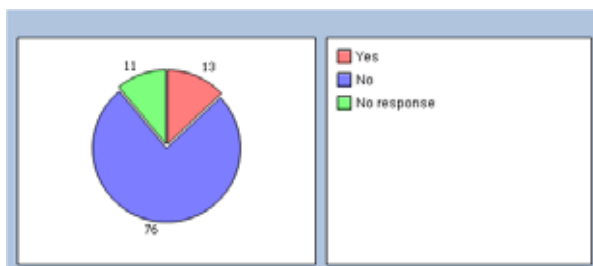
Do you have a long-term health condition? These are sometimes called chronic diseases and include asthma, COPD, heart diseases, liver and kidney diseases or any other ongoing illness.

Yes **42%**
No **48%**



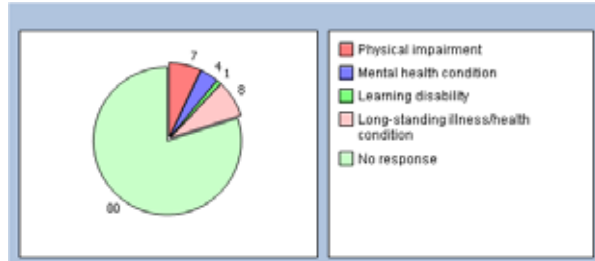
Do you consider yourself to be disabled?

Yes **13%**
No **76%**



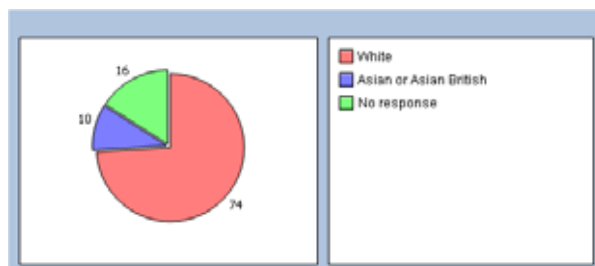
If “yes”, what type of impairment?

Physical impairment **7%**
Sensory impairment **0%**
Mental health condition **4%**
Learning disability **1%**
Long-standing illness/health condition **8%**
Rather not say **0%**



Ethnic origin:

White **74%**
Dual ethnicity **0%**
Asian or Asian British **10%**
Black or Black British **0%**
Other ethnic groups – see separate comments **Appendix 5**



Appendix 5

Additional patient comments to questionnaire

The following are responses to the questions which allowed for further information to be recorded. However, you will note that some of the responses bare no reflection on the question, but have been left in to give a true report of the completion of the questionnaires.

How often do you use the practice?

2 monthly regular appointment
Approx fortnightly
As required
As when needed
For my in-laws sometimes
I am a new patient but based upon previous experience likely to be once a year
it varies
It's been every week through sickness but hopefully it will go back to a couple of times a year.
More since having son
Normally only once a year but over the last six months more regularly - every couple of months
Not been for years but had routine bloods done
PSA test each 6 months
Regularly as required
Sometimes more often
Somewhere in between a week and a month
When necessary
When required
Whenever I get an appointment it is very difficult to get it

How do you normally book an appointment to see a doctor or nurse?

(10 days) Last time 2 on holiday 1 day off Organiser??
Difficult to book in to see specific doctor for ongoing visits as requested by doctor for the specified date. Have had bad experiences recently
At end of previous consultation
But have resorted to coming down in person as couldn't get through on phone, even when I rang at 8 O'clock
By having another phone line so that we can easily get our appointments because phone line is always so busy in the mornings by the time we get on the line all appointments are gone.
For it not to take so long
Insisting on patients phoning at 8am on the day for same day appointments is very irritating
Only in person on one occasion when unable to get through
Possibly on the net
Simplify the system
Stagger the amount of appointments available so you don't have to ring early on and wait in a queue esp if you work early hours

How could we make it easier to book an appointment?

? not sure of the process now. It used to be you could not book in advance but can only book on the day if an emergency
1. Advanced booking up to 10 days 2. Dedicated mobile phone at surgery for patients to cancel or request for alternative days 3. Surgery to communicate or phone re appointment
8.00am is the time I usually arrive at work which makes it impossible for me to make an appointment on the day unless I go to work late
All appointments seem to have disappeared by 8.01am. Need to extend the booking period so appointments can be booked easier.
Allow appointments to be made at some time other than 8am
Allow people to book an appointment say 48-72 hours ahead
Allow to book in advance as required possibly on line
Allow you to pre-book when its a case you have to come due to medication
Booking early appointments without being told to ring at 8am on the day
by letting people see doctors easily
By the internet
Could we not have a few mornings where we can just turn up on the day & wait for an appointment - you have

people who miss appointments & don't turn up
Currently have to wait weeks if not month for an appointment
Easy enough but 4 weeks to see a doctor seems a long time
Encouraged to make non urgent as have to wait too long for an appointment
Fine as it is
Get more doctors
Get rid of two week appointment system
Have an open surgery for urgent appointments
Have found it difficult by phone. When asked to ring back at 8am lots of other people doing the same so no appointment available
Have more appointment slots when I am ill, I need to see a doctor quickly, not in a few days
Have more appointments available in the evening
Have more appointments available on the day without having to ring at 8.00am or 2 pm as sometimes you can't get through and when you do there's no appointments left
Have more daily appointments available - no one knows they going to be ill
Have some appointments available within a day or so even if urgent if I need medical help I would like to get some and not have to go to A&E/minor injuries clinic. I don't contact surgery unless I need an appointment
I don't know your ways of going about this please make it easier
If the next availability of doctor or nurse is known for example message when phoning surgery
I'm not sure I understand how appointments work especially non-urgent i.e. when they available etc
It could be easier to book a non urgent appointment by phone
It is hard when you are asked to ring after 2pm for an appointment and be told that there are none. Perhaps a walk in system would be better to sit and wait.
It is very good
Keep the evening surgery for working patients
Less rigidity in appointment system
Make it so you don't need to ring on the day
Make more available/allow advanced booking
Maybe understanding the circumstances of the appointment e.g. if it involves kids
More appointments available for further in advance
More friendly staff
My experience with non urgent appointments is often want of a couple of weeks so greater availability of non urgent appointments is needed
Not by phone at a specific time
Not easy as presume large demand for them
Online access-could be too easy & therefore abused?
Online booking, call back if rung. It's usually difficult to get through on the phone
Phone or internet would be best. It can be a bit stressful to clock watch at 8am only to be holding on with an engaged tone each time you try and then all appointments have gone.
possibly e mail - when available
Reception staff are appallingly rude. It would be good to be able to book on the net
Ridiculous system! To ring 2 days before you need an appointment then to be told to ring back on the day is a terrible system!!
The appointments are made too far in future maybe they can be made for perhaps a little shorter like 7-10 days so that we do not have to choose the urgent option
To book a week in advance not 48 hours
Work round mutual convenient time

If you couldn't get an urgent appointment why do you think this was?

Always managed to obtain one
Because reception won't let us see doctors
Don't ask for urgent appointments
Fortunately never tried to book urgent appointment. Just no appointments
Had to use the walk in centre at Burmantofts
Had triage
Not with regular doctor
Previously have had problems
Probably because there were others with emergencies
Reception staff rude and unhelpful
Sometimes I've been told there is only one doctor on duty
The appointment times offered were not suitable
Yes but with difficulty - having to phone early morning on a specific day

How could we make it easier for you to cancel an appointment?

Again online services would be great
Better trained reception staff
By e-mail

Can we not cancel & make appointments on line please. I don't want to ring & then have to sit still for 20 minutes on a morning with children while trying to get them ready for school & myself
Cannot really make any reasonable comments
Difficult to re arrange
Don't ever cancel as difficult to get another one. Staying open would be a good idea
Easy to cancel very difficult to rearrange
Have more evening appointments
It's easy to cancel by phone but not make another
No idea I ring and it just happens
No way
I don't find any difficulty with cancelling appointments
Patient can communicate on surgeries dedicated mobile phone where a voicemail can be left
To have appointment in the first place. To cancel would be a start

How do you feel about the information we currently provide to you?

I rarely visit the GP Practice
Printed out the info about illness supplied by doctor

What kind of information and advice would you like to be able to access in this practice?

Health Risks
Verbal advice
GPs should provide more info and advice re natural remedies, homeopathy and counselling, NLP practitioners
More info for older people on notice boards - groups to join & what neighbourhood network schemes available
General advice such as support. Information about local health services so that if a patient don't get emergency appointment so patient can go somewhere else.
Would like more info on children's services i.e. counselling
Results of tests patient to be contacted

Do you feel that you have enough opportunity to give feedback, raise concerns and complaints or make suggestions?

After appointments usually rushing off
Can you please change your entrance doors as it's very difficult to get in to pull the doors when you have little babies and disabled access is poor
Don't feel reception staff are very approachable
Don't like to complain. Have to be thankful for the care we get
Good idea about this survey
Happy to fill this questionnaire in as it gives me the chance to say not very happy
In a recent experience that I was unhappy with although I didn't complain I feel that some of the receptionists need to take more care in dealing with panic situations, and dealing with parents/patients. I didn't think I was dealt with properly when my child was having a reaction. Maybe they could have some training with emergency situations and dealing with relatives!
I do feel that female patients miss opportunities to raise concerns with no female doctor
I stated I wasn't happy when I could get a nurses appointment for stitch.
I think in a practice of this size a female doctor is a necessity. I hardly know of any other practice where there are no female doctors
I wish there was a lady doctor here. A lot of women in the area say the same
Not aware of how to give feedback, raise concerns etc. Never seen practice booklet
Not been in a situation to raise any concerns
Not felt needed to do this
Not informed how to do this. This questionnaire is the first time I have been asked
This is first time

If you have been prescribed medicines within the last 12 months please answer the following statements.

I am happy at the moment. Your waiting room has been changed round - much, much better.
Be informed of any possible changes to regular medication that may be beneficial
By having regular checks with the doctor
Chairs uncomfortable in reception
Concerned about effects of combination of medicines
Ensure that notes attached to e mail requests for repeat prescription are read
Explain more in depth without medical jargon
Fine as it is
Give repeat prescriptions like I had before at old surgery, Allow pre-booking
Happy at this present moment. I have been with the practice 15 years Good Points: **1.** Happy with GP I see and my treatment **2.** Happy with the nurses **3.** Appointment situation: needs urgent attention quickly it is very stressful to obtain appointment. To have to stand outside at 7.45am and not well and then to be told all appointments

taken this 2012?

Have doctors review more often especially before appt

Have some say in review, better understanding of review of medications

I need to read about it more often

I read the leaflet and usually find out things. I would rather not know - re side effects

Just readily give me every day advice of when to take it, and possible side effects

Mostly comes from literature included with medication

Not necessary

Notice re possible side effects and if any problems what they may be

Offer reviews periodically in line with condition

On my in-laws behalf they never know what the medication is for

Simplify the info I feel uncomfortable that reception is so 'open' A lady doctor would be very beneficial to me

To send prescriptions to the pharmacy on time every month

We do not appear to get any choice in the medicine prescribed. (There must be more than one choice)

Its deplorable that no lady GP is registered full time at this practice

Would like more toys and books to keep my child amused while waiting for our appointment

Written advice on important matters

Other ethnic groups

Arab

Caribbean Asian

Chinese

Iranian

Spanish

White Jewish

Not looking forward to Yorkshire Vets arriving parking will become very difficult

Appendix 6						
	Patient Issue	Action Required	Milestones	Practice Lead	Patient Group Lead	Timeframe
	Access					
1	Issue Excessively high DNA (Did not attend) rate. The practice loses up to approximately 180 appointments (10 surgeries) per month from patients failing to attend.	To reduce number of DNA's in order to make up to 180 appointments per month available for "face to face" consultations.	<ul style="list-style-type: none"> a. Where possible, text messages will be sent to patients the day before their appointment to remind them. b. Educate patients through various means e.g. use of practice web site, posters, leaflets, practice newsletter and notifications on prescriptions. c. Telephone reminders to patients with 2 or more consecutive appointments. d. Telephone reminder to patients known to DNA regularly. e. Telephone reminders to patients with known memory problems. f. Letter to patient's who DNA 	<ul style="list-style-type: none"> Practice Manager Practice Manager Reception team Reception team Reception team Administration team 	<ul style="list-style-type: none"> N/A N/A N/A N/A N/A N/A 	<ul style="list-style-type: none"> April / May 2012 April / May 2012 April / May 2012 April / May 2012 April / May 2012 April / May 2012
2	Issue Long waiting time for telephone to be answered	To reduce holding time for telephone to be answered	<ul style="list-style-type: none"> a. Distribute Administrator workload to provide addition person for telephone answering during busy period b. Relocating more administrative staff into the reception area, to allow more flexibility in assisting patients and answering telephone calls etc. c. Emphasis on call handling relayed to reception staff 	<ul style="list-style-type: none"> Practice Manager Practice Manager Practice Manager / Senior Receptionist 	<ul style="list-style-type: none"> N/A N/A N/A 	<ul style="list-style-type: none"> April 2012 TBC April 2012
3	Issue Attitude of reception staff	To improve patient perception of reception staff	<ul style="list-style-type: none"> a. Meet with reception team to discuss findings of patient survey. b. Further customer service training. c. One to one discussion regarding complaints with identified staff 	<ul style="list-style-type: none"> Practice Manager Practice Manager Practice Manager 	<ul style="list-style-type: none"> N/A N/A N/A 	<ul style="list-style-type: none"> April 2012 May 2012 Ongoing

			<p>members if they are identified by the complainant.</p> <p>d. Look at improving the appearance of the reception area to make more patient friendly e.g. removing the security screen.</p> <p>e. Having a nominated receptionist whose sole purpose is to meet and greet patients at reception, without the distraction of answering telephone calls etc.</p> <p>f. Explore option of having a receptionist "front of house" within the waiting area to welcome, assist and sign post patients.</p> <p>g. Invite one or two members of the Patient Group to attend a meeting with the reception staff to talk about their experiences at the reception desk as patients.</p>	<p>GP Partners / Practice Manager</p> <p>Practice manager / Senior Receptionist</p> <p>Practice Manager / Senior Receptionist</p> <p>Practice Manager / GP representative</p>	<p>N/A</p> <p>N/A</p> <p>N/A</p> <p>TBC</p>	<p>Autumn 2012</p> <p>May / June 2012</p> <p>May / June 2012</p> <p>May 2012</p>
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Shadwell Medical Centre



Dr RK Potts Dr JM Sager Dr DA Stocks Dr IA Bargh

Shadwell Medical Centre Patient Participation Group Meeting notes

Date: 19 December 2011

Time: 10.30am – 11.30am

Attendees: GP Representative, Melanie Keane (Practice Manager), 6 patient representatives

The meeting was opened by Melanie. She welcomed the members and thanked them for attending the meeting. Melanie asked members to introduce themselves to the meeting.

She went on to explain the purpose of the group and explained that during the first meeting the priority was to create a patient questionnaire that was deemed appropriate for Shadwell Medical Centre. A draft copy of the "Calibre" patient questionnaire had been previously sent to the group members and they had been asked to make comments about it and how it could be developed for Shadwell Medical Centre.

The group went through each individual question and comments were made about the appropriateness of the question, whether it should be removed, reworded or left as it was. This exercise raised some good valid points which Melanie noted.

Further discussions took place regarding the most urgent needs of the practice. Several members reported that a female doctor was required. The GP representative and Melanie explained the reasons why this was not possible at the moment but that this could change should there be any retirements or if a current doctor was to leave.

Melanie was asked if there was a practice leaflet available for patients telling them about the practice and services available. She said that there was a leaflet and that she would make it readily available for patients.

The waiting room was discussed as comments were made about it being unwelcoming. Melanie to look into this.

One member of the group asked if there could be a nurse and receptionist on the group. Melanie to discuss this with the staff again and ask for volunteers.

Communication was a key area of discussion. Members asked if there could be an easier way to cancel appointments. Melanie is to look into various options.

There was a discussion around the lack of appointments. Melanie informed the meeting that over 200 appointments are missed almost monthly. She explained that this does have a knock on effect on appointment availability. She told the group that letters are sent to patients if they do not attend (DNA) an appointment.

Melanie will look into starting up a text messaging service for reminders for patients.

Melanie drew the meeting to a close by confirming the points that were taken regarding the questionnaire. Two of the group members offered to help Melanie with the amendments to the questionnaire.

Melanie thanked the members for their input and support.

Appendix 8

Shadwell Medical Centre



Dr RK Potts Dr JM Sager Dr DA Stocks Dr IA Bargh

Shadwell Medical Centre Patient Participation Group Meeting notes

Date: 21 March 2012

Time: 10.30am – 12.30pm

Attendees: GP Representative, Melanie Keane (Practice Manager), 7 patient representatives

New members introduced themselves to the meeting. The meeting opened with the group members were given a copy of the analysis of the questionnaire. The emphasis was on looking at areas that need to be addressed by the practice with input from the group.

GP representative explained to the group that the survey showed there was clearly a problem with access to the surgery services and the group agreed this was an area in which the practice should address in the first instance. The group were told that the practice had done some audit work, collating information regarding numbers of appointments and the number of missed appointments (DNA's). The group were told that the practice actually offer the appropriate number of appointments per 1000 patients based on national averages.

The group were told that the practice loses on average 180 appointments per month when patients fail to attend appointments without informing the practice (DNA's) and this lead to discussion about how this issue could be addressed. The group members were surprised at the number of DNA's that were reported and felt that this issue needed to be addressed.

The GP representative said that the practice were aware of the access problems and want to work with the group on this issue.

The GP representative told the meeting that there are options for the practice which included an advertising/patient education campaign, sending text messages to patients to remind them of their appointments, telephoning those patients who the practice know DNA on a regular basis and trialling a new "Emergency Appointment Service". One member of the group asked who makes the decision as to whether the patient should be seen as an urgent patient or not. The GP representative said that if the patient says it is an emergency the receptionist has to take their word for it. He said that the practice did not want the reception staff making a clinical decision for which they are not clinically trained.

The GP representative said that by offering the new "Emergency Appointment Service" the practice would need to increase the through put of patients. To do this the new appointments would be 5 minute emergency appointments to deal with the patients' on the day emergency/acute problem. A member of the group said that it would have to be made clear to the patients when they rang up that this was a 5 minute appointment. The group agreed. The GP representative said that it would also have to be "safe" and "sustainable".

One group member asked how successful the late night appointments were and she was told that they are extremely successful and used for the majority of the time by those patients who find normal surgery time difficult due to work commitments. The GP representative reported that the extended hour's session had recently been reduced to 1.5 hours as a result of a reduction in PCT funding.

The meeting moved forward with one member asking "How can we encourage patients to turn up? Is it an area we need to look at?"

The GP representative said that this was an area that we needed to look at, as a reduction in the DNA rate would impact on appointment availability.

One member said that it would be "difficult to change some people". One member said that it is "discourteous and rude".

The GP representative said that the practice does write to patients who DNA but it didn't seem to have an impact on whether they attended their next appointment.

Melanie was asked how many patients had DNA'd the previous day. She told the meeting that 18 patients did not attend (18 lost appointments).

The question was asked as to "how far in advance appointments were booked when a patient DNA'd". The meeting were told that "this could be any length of time, there was no real pattern".

The GP representative said that "the practice used to only release appointments for one month in advance but patient feedback was that they didn't like it because they couldn't book long enough in advance". Melanie said that "patients can currently book 4 months in advance".

A group member asked "how the practice compared with other local practices". The GP representative said that "Melanie and himself had been at a meeting the day before when this topic was being discussed and all the Practice Managers were reporting similar problems."

A member of the group asked if "this was where the practice wanted to start". The GP representative said that "it was one of the areas." He said that the practice feel that the proposed "Emergency Appointment Service should be started on trial basis, but the practice were concerned as to whether thus would be sustainable". He said that "the practice propose to try it and review it on a regular basis as the most importantly it needs to be safe."

One member stated that it seemed that there was "too much load and too much burden and asked if a female GP would relieve the problem". The GP representative told the meeting that "one of the partners would be retiring at the end of June and that the practice had advertised for an assistant. However, they could not advertise for a female doctor".

The same member asked the meeting "if they felt there was a need for a female GP" to which all patient group members agreed.

The GP representative asked the meeting for their views.

One member said that "patients should be told that the practice needs their contact numbers."

When one of the members asked if "GPs ever catch up" the reply from the GP representative was that "it was very rare for them to do so and gave an example of his own working day on a Thursday when he has 1 hour between his morning surgery and his afternoon surgery and during this time he had to go on visits, do paperwork and have lunch".

One member asked if the Patient Group could have a notice board. Melanie said that "there was one already, but other materials had been put on it". Melanie is to try to source another notice board for sole use of the Patient Group materials.

The group suggested that the practice advertise their DNA policy on the notice board. Melanie is to take this forward. The GP representative agreed that "the notice boards in the surgery looked cluttered" at which point one of the group members said that the "new look" waiting room (the chairs have been rearranged) looked much better."

The GP representative said that ringing patients was not cost effective but text messaging was, after the initial setting up; it is just a click of a button. He said that we have to now change our (the practice) mind set.

Melanie said that "there were some problems regarding text messaging patients in that the practice do not always have up to date telephone numbers for patients, some patients use their partners' telephone numbers (this could cause confidentiality issues) and not all patients have given permission for the practice to send text messages." Melanie said that "there is an ongoing project with the reception staff whereby they are asking patients at every contact for their up to date details."

One group member asked whether "it was possible for the receptionist to tell from a telephone conversation whether a patient needed to be seen or not". The GP representative said that "if it was a child they should always be seen, but it was not always possible for receptionists to know with other patients".

The GP representative said that "the GP partners would also be looking at the number of patients that they recall to surgery for follow up as this varied between each GP."

One group member asked "if the receptionist were aware of the issues that had been raised in the questionnaire." Melanie said that "she had met with them earlier in the month and had discussed her concerns at the number of comments she was receiving about their attitude". She said that she "had not yet fed back the results of the questionnaires as she had only just analysed the reports."

The GP representative said that "the practice was looking at training for receptionists at the moment. The receptionists were all aware about treating patients with dignity and respect." He also said that "the Partners were looking at making some changes to the reception area, hopefully in the autumn and this may include taking down the screens between the reception staff and the patient waiting area". He said that the practice was also "looking at having one dedicated receptionist who dealt only with the face to face issues with patients and not answering the telephones."

One member of the group cited an example of "a patient waiting to be seen by the receptionist who carried on discussing her personal issues with a colleague without acknowledging that the patient was there".

Another member said that "the practice needed to be looking at smart ways of sorting the system and that if the receptionists' issues needed to be massively addressed or the system would fail."

The GP representative had to leave the meeting early so in his summing up he reported back that the practice could:

- Prepare a newsletter which will have an article on DNA's. and the new "Emergency Appointment Service".
- Put reminder message on prescriptions.
- Put details on the website.
- Investigate whether a message can be put on the television in the waiting room.
- Commence using text messages to remind patients of their appointments.
- Display a DNA policy on the notice board
- Send polite letters to patients when they have failed to attend their appointment.
- Put alerts on patient record when they regularly DNA so as to remind them.
- Commence Customer Service Training for receptionists.
- Review the lay out of the reception area and look at the feasibility of removing the screens.

The GP representative told the meeting that their input was invaluable and that the practice know they need to address the access and front of house problems.

One member of the group thanked the GP representative for his input into the meeting and said that the information had been informative.

The GP representative left the meeting

Melanie took over the Chair of the meeting

Melanie told the group that this was their meeting and as such that the group should appoint a Chair & Secretary. She had also given the group an example "Terms of Reference" to look at, but it was agreed that this should be carried forward to the next meeting along with the discussion about appointing a Chair and Secretary. However Melanie said that if anyone wanted to put themselves forward they should let her know and perhaps put a short piece together about their experience and background.

Melanie explained to the group that she had a report to write detailing the activities that the practice had carried out in the setting up of the group and what activities the group had been involved in. She told the group that she also had to create an action plan with the group detailing the areas of the questionnaires that the group wanted the practice to work on.

One of the group members asked if Melanie needed anything else for her report. She said that she felt she had enough to be able to put the report together and that she would formulate an action plan from the comments that had been passed during the meeting and from suggestions that were also put forward.

One group member asked if the meetings could be more often. Melanie said she would try to arrange for them to be more frequent.

Melanie thanked the group for their input and support.