Shaftesbury Medical Centre

Patient Participation Report 2012/13

**Practice Population Profile:**

The practice was established in 1995 and is situated in South Harrow where there is a mix of social and private housing.

We currently have a list size of approximately 4,340 patients of which 3,320 are aged 16 or over. 38% are in the 16-34 age group, 51% in the 35-64 age group and 11% are aged 65 or over.

Harrow council figures in 2010 show unemployment for this part of Harrow to be approximately 5.2%. The practice has 25 known carers.

We have a relatively young transient population with a diverse ethnic mix including Sri Lankan, Nepalese, Eastern European, Afro-Caribbean, British/Other White as well as a large Asian population.

We are responsible for a residential home for the elderly with approximately 30 residents and also look after a group of 7 patients with Moderate Severe Learning Disabilities in residential care.

**Current Opening Hours:**

|  |  |  |
| --- | --- | --- |
| Monday | 08:30 am to 1:00 pm | 1:30 pm to 6:30 pm |
| Tuesday | 08:30 am to 1:00 pm | 1:30 pm to 7:30 pm |
| Wednesday | 08:30 am to 1:00 pm | 1:30 pm to 5:00 pm |
| Thursday | 08:30 am to 1:00 pm | 1:30 pm to 6:30 pm |
| Friday | 08:30 am to 1:00 pm | 1:30 pm to 6:30 pm |

**PRG Profile:**

The group is steadily growing. There are currently forty patients of mixed social backgrounds signed up to the group.

13% are in the 16-34 age group, 77% are in the 35-64 age group and 10% are aged 65 or over.

Ethnic Mix: 33% Indian, 7% Pakistan, 7% Mixed Race, 20% Afro-Caribbean, 13% Other Asian and 16% White.

The group consists of patients from a variety of social economic backgrounds.

The practice is actively recruiting patients in a variety of ways including advertising on our website [www.shaftesburymedicalcentre.co.uk](http://www.shaftesburymedicalcentre.co.uk), in the practice newsletter, posters, Jayex LED Display as well as word of mouth.

Sign up forms for a virtual group have been made available in reception and on the practice website. The majority of interest has come from the virtual group, however attendance at meetings is increasing.

We are fortunate that the PRG is a relatively fair representation of the practice population. For those patients in residential care feedback is sought opportunistically from the carers and residents as well as ensuring invitations are sent for participation in surveys.

**Practice Survey**

**Priority Setting:**

The practice met with the Patient Participation Group. The key findings of the GP National Survey were presented as a starting point for discussion. Patient feed back following on from that discussion formed the basis of the agreed priority areas for the survey.

The agreed areas were the appointment system, reception, extended hours, nurse appointments and access - telephone consultations.

**Formulating the Survey:**

The practice looked at several existing surveys to use as a template for our own in house survey. A draft questionnaire was drawn up using the patient feedback given in the previous PPG meeting. At a further meeting, the draft survey was discussed and some adjustments were suggested and agreed.

**Carrying out the Survey:**

The survey was carried out in March/April 2012. Invitations to complete a survey were sent to all patients signed up to the patient participation group including the virtual group. Patients attending the practice were actively encouraged to complete a survey. Posters and LED display promoted the survey. The survey was made available on the practice website.

Invitations to complete surveys were also sent to our Elderly Residential Home, our Residential Care Home for Learning Disabilities, a random selection of our Housebound Patients and a random selection of the 16-34 year olds in order to reach as wide a cross section of patients as possible.

**Survey Results:**

The demographics (age range and ethnicity) were as expected and appeared to be representative of the practice population.

Booking appointments – the majority of patients are booking via telephone and 79% were satisfied with the date and time offered.

Extended hours - 67% of patients were aware of the extended hours service.

Preferred Type of Appointment – There was an interesting response to this question in that there were several combination responses, which on reflection, were felt to have been prompted by presentation of the question. The results appear to show that patients preferred a combination of booking on the day and booking in advance. This reflects the current system.

Telephone Access – 83% of patients would be satisfied with a telephone consultation where appropriate.

Satisfaction with Reception Staff – The majority of patients were either very satisfied or satisfied with our reception staff.

HCA Awareness – 50% of those that responded were aware of the nursing skill mix in the practice.

The full results were made available on the practice website.

**Agreement of Action Plan:**

The practice met with the Patient Participation group on 8.8.2012. The survey results were presented and circulated. Patients were invited to share their thoughts and comments on formulating an action plan and a lively discussion followed. A need to improve access became apparent.

The following action plan was agreed:

1. Telephone consultations – The practice will formulate a list of issues that would be considered suitable for telephone consultations, provide reception staff with guidance on this, ring fence slots on the computer system for this. The practice to implement as soon as possible and trial the new system over the coming months.
2. Extended Hours - The practice will review the current extended hours provision exploring Saturday Mornings as a possibility.
3. 2pm call back for on the day evening appointment – ongoing review.
4. DNA’s text reminders – The Practice will explore the options.

**Summary of Progress:**

Telephone Consultations

This has now been formalised. The practice is offering both face to face and telephone consultations. Telephone consultations were being offered for follow up of existing conditions, review of results, medication queries and reviews.

The aim is to increase capacity and ease pressure on the appointment system.

Extended Hours

As a result of patient feedback on weekend access the practice has reviewed the extended hours service and from April 2013 plan to move the extended hours provision to a Saturday morning surgery with all three partners participating on a rotational basis.

2pm call back for on the day evening appointment

The survey results had indicated that patients were happy with this system, however, there were mixed feelings at the last Patient Group Meeting and the practice is happy to keep this under review.

DNA’s text reminders

The practice along with all other practices in Harrow have had a new clinical software programme installed. We understand that the software has the functionality to send txt message reminders to patients. The practice is currently exploring this.

This report has been published on the practice website.