



# Gables Surgery

## Patient Participation Report 2013/14



Including Patient Representative Group (PRG)  
Survey Results



**Gables**  
Patient  
Participation  
Group



**NHS**  
*Barking and Dagenham  
Clinical Commissioning Group*

# Introduction

Back in 2011, the Gables Surgery began participating in the first stage of the Patient Participation Direct Enhanced Service (PPDES).

The PPDES is a Department of Health scheme through which GP practices are asked to actively obtain for the views of their patients in the form of a Local Practice Survey and the establishment of a Patient Representative Group (PRG) to give feedback and to develop an action plan of possible improvements and changes to improve practice services.

Initially the Department of Health commissioned this as a two year scheme to ensure that practices are actively including their patients in decision making, regarding the quality of services and care provided. Gables Surgery has participated in both of the 2 years of this scheme so far, and the results for 2011/12 and 2012/13 are still available to view on the surgery website: [www.gablesurgery.com](http://www.gablesurgery.com)

It was decided by the Department of Health that this scheme would continue for a further year into 2013/14.

As in the previous two stages, the same process has been applied in compiling the following report as detailed below:

**Component 1** - Establish a PRG (Patient Representative Group) comprising only of registered patients and use best endeavours to ensure PRG is representative.

**Component 2** - Agree with the PRG which issues are a priority and include these in a local practice survey.

**Component 3** - Carry out the local practice survey and collate and inform the PRG of the findings.

**Component 4** - Provide the PRG with an opportunity to comment and discuss findings of the local practice survey. Reach agreement with the PRG of changes in provision and manner of delivery of services.

**Component 5** - 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 NHS England.

**Component 6** - Publicise the Local Patient Participation Report on the practice website and update the report on subsequent achievement.

The survey results in this report summarises the development and outcomes of Gables Surgery Patient Reference Group (PRG) Survey in 2013/14.

# Report Contents

1. Profile of the PRG.
2. Agree areas of priority with the PRG
3. Collate patient views through the use of a survey
4. Provide the PRG with an opportunity to discuss survey findings and reach agreement with the PRG on changes to services.
5. Agree an action plan with the PRG and seek PRG agreement on implementing changes
6. Additional Information
7. Publicise actions taken – and subsequent achievement

## LOCAL PATIENT PARTICIPATION REPORT 2013/14

Practice Name: Gables Surgery F code: F82642

### 1 Profile of the PRG

**Establish a Patient Reference Group (PRG) comprising only of registered patients**

The table below is a comparison of the practice population and the PRG profile by age, ethnic group and gender.

<b>Total Practice List Size: 3387</b>			<b>PRG Size: 116 (3.42% of Practice)</b>		
<b>Practice population profile</b>	<b>Number</b>	<b>% of total</b>	<b>PRG profile</b>	<b>Number</b>	<b>% of total</b>
<b>A G E</b>					
% Under 17	752	22.33%	% Under 17	<b>Not included in Survey</b>	
% 17-24	393	11.69%	% 17-24	8	6.84%
% 25-34	512	15.20%	% 25-34	16	13.68%
% 35-44	459	13.23%	% 35-44	18	15.38%
% 45-54	505	14.99%	% 45-54	24	20.51%
% 55-64	337	10.01%	% 55-64	23	19.66%
% 65-74	213	6.32%	% 65-74	17	14.53%
% 75-84	114	3.38%	% 75-84	8	6.84%
% Over 84	83	2.46%	% Over 84	3	2.56%
<b>ETHNICITY</b>					
<b>White</b>			<b>White</b>		
% British Group	1964	57.99%	% British Group	80	68.38%
% Irish	31	0.97%	% Irish	2	1.71%
<b>Mixed</b>			<b>Mixed</b>		
% White & Black Caribbean	44	1.30%	% White & Black Caribbean	2	1.71%
% White & Black African	15	0.44%	% White & Black African	1	0.85%
% White & Asian	22	0.65%	% White & Asian	0	0%
<b>Asian or Asian British</b>			<b>Asian or Asian British</b>		
% Indian	100	2.96%	% Indian	3	2.56%
% Pakistani	91	2.69%	% Pakistani	3	2.56%
% Bangladeshi	50	1.48%	% Bangladeshi	2	1.71%
<b>Black or Black British</b>			<b>Black or Black British</b>		
% Caribbean	72	2.13%	% Caribbean	7	5.98%
% African	328	9.68%	% African	9	7.69%
<b>Chinese/other ethnic group</b>			<b>Chinese/other ethnic group</b>		
% Chinese	12	0.35%	% Chinese	1	0.85%
% Any other	40	1.18%	% Any other	7	5.98%
<b>G E N D E R</b>					
% Male	1599	47.48%	% Male	55	47.41%
% Female	1769	52.52%	% Female	61	52.59%

### 1a. Process used to recruit to the PRG:

In continuation from the 2011/12 & 2012/13 PRG Survey, the following process was used to recruit the PRG (Patient Reference Group) in 2013/14.

- + As before, we recruited only registered patients 17 years old and over.
  - + Email Invitations were sent to existing PRG members that provided their email address in the past. Also patient who had recently provided us with email address as part of their registration for Vision Online Services were sent with email containing a link to an online version of the surgery: <http://eSurv.org?u=gablesprgsurvey2014>
- A barcode was also created for Smartphone use:



- + Surveys were also made freely available at the surgery reception for patients to complete.
- + An advertisement poster was also displayed in the surgery reception and in the patient information Folder in waiting area.
- + Members of the Gables Patient Participation Group we also invited to complete the PRG Survey as well as helping to recruit other patients to complete the PRG Survey by volunteering to help recruit patients.
- + Clinicians also helped to distribute surveys to patients willing to participation at the end of their consultation. Also, for housebound and elderly patients, copies of the survey were provided by the nurse during home visit rounds.

### b. Differences between the practice population and members of the PRG: *describe any differences between the patient population and the PRG profile, what steps the practice took to engage any missing group.*

The PRG in 2013/14 comprises 116 patients – which is 3.42% of the practice population. These patients have been actively recruited by reception/ clinical staff and members of the Gables Patient Participation Group, by advertising for participants in the surgery. Also as previously mentioned, email invitations were sent to patients who took part in the 2011/12 & 2012/13 PRG Survey.

The results show that each age group is represented within the PRG group, but with the majority of patients in the PRG being the age of 35 and over. There is a slight underrepresentation of under 35s. This result can be explained in the fact that it is the older age groups who attend and make use of the surgery service more often. Every effort was made to include younger patients in the survey including emailing a link to a web based version of the survey to complete online.

The largest ethnic group of the practice is White British at 57.99%, followed by Black African at 9.68% and the third largest Indian at 2.96%. This is reflected in the PRG, with White

British being somewhat over represented, Indian almost fully presentenced, and Black African is slightly underrepresented. All other ethnicities aside from Mixed “White & Asian” have been quite closely represented in this year’s PRG survey. Again every effort was made to aim the survey at all ethnicities, and all surveys asked for the patient’s ethnic origin. However, we were reliant on the rate of reply of each ethic, age, and gender group to gain a fully representative PRG.

In terms of gender representation, the PRG has been successful again as it very closely reflects that of the practice population, which also has a slightly higher female to male ratio.

## 2 Agree areas of priority with the PRG

### a. The areas of priority agreed with the PRG:

In continuation from the 2011/12 & 2012/13 survey’s it was agreed that we would ask patients how they would rate the level of service the surgery provides over the last year in the following areas:

- + Getting an appointment
- + Clinical care provided by both the Doctor/s & Nurse
- + Telephone answering and access
- + Waiting room facilities
- + Patient information
- + Opening times
- + Your overall satisfaction with the surgery.

It was decided that we would give patients the choice to rate the above areas either as:  
+ Good, + Satisfactory or + Poor.

Also following on from the 2012/13 survey and in light of development of recent online and electronic services introduced into the practice it was agreed that the following questions would be asked in the survey to which the patient can reply either: + yes or + no:

- + Do you refer yourself to the practice website ([www.gablessurgery.com](http://www.gablessurgery.com)) or the Gables Surgery section of the NHS Choices website ([www.nhs.uk](http://www.nhs.uk)) for information about the practice? + If so, have you found the information available helpful?
- + Are you aware of our new online services (Vision Online) for online booking and cancelling of your doctor’s appointment, as well ordering your repeat prescription online?
- + Are you aware of the new Electronic Prescribing Service (EPS) which enables the practice to electronically send your prescription to the nominated pharmacy of your choice?
- + Have you found the above new services beneficial in gaining access to the practice and its services?
- + Do you feel that the practice would benefit from a suggestion/ comments box, where patients can leave their views and suggestions in regards to the practice and its services?

Also due to the large number of people not attending their booked appointment, it was decided to include the following question in the survey:

- + To prevent any DNA (Did Not Attend) of your doctor’s appointment, would you find it beneficial if an SMS text message reminder service was introduced to the practice?

In continuation from the 2011/12 & 2012 /13 surveys, it was agreed also to provide a space at the end of the survey where patients can leave free text comments and suggestions regarding the practice and its services.

**b. How the priorities were decided:**

The priorities were decided in a meeting with PPG representing the PRG on 27/01/2014.

The following points were discussed:

- + Areas of priority for the survey questions based on 2012/13 survey
- + General survey layout
- + Plan for recruiting and re-recruiting for 2013/14 PRG survey
- + Implementation and delivery of the survey
- + Distribution, advertising and marketing of the survey.

### **3 Collate patient views through the use of a survey**

**a. When was the survey conducted? How was the survey distributed?**

- + The survey was conducted between January 2014 and March 2014.
- + It was distributed by Email to existing PRG members who had completed the survey in 2011/12 & 2012/13 as well as to registered patients who had recently signed up for our Vision Online Service.
- + Copies of the survey were also available for patients to complete at the surgery reception.

**b. Which questions in the survey relate to the priorities in (2a)?**

All the questions in the survey were relevant to the priorities mentioned in 2a.

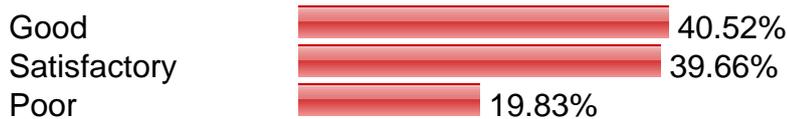
## 4 Provide the PRG with an opportunity to discuss survey findings and reach agreement with the PRG on changes to services

### a. Describe the survey findings:

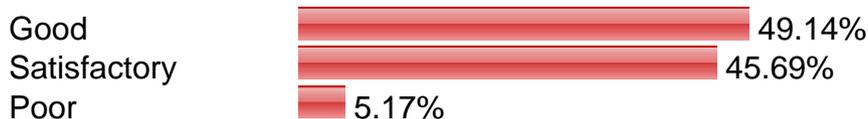
Below are the results of the Local Practice Survey through which the PRG were required to rate the practice's performance in the following areas:

#### Practice Performance

##### Getting an appointment:



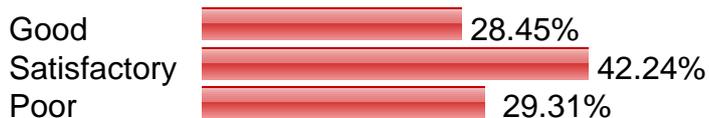
##### Clinical Care (Doctor):



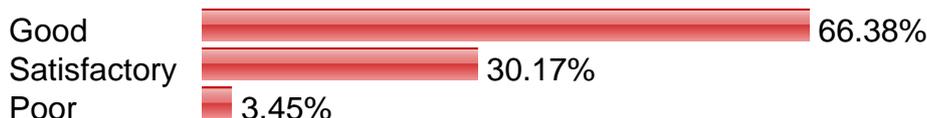
##### Clinical Care (Nurse):



##### Telephone answering and access:



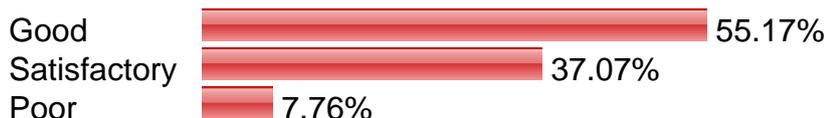
##### Waiting room facilities:



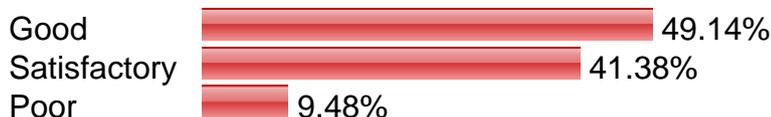
##### Patient information:



## Opening times:



## Overall satisfaction with the surgery:



## Your Views

As part of the survey, the PRG were also asked their opinion on the following questions:

**1) a)** Do you refer yourself to the practice website ([www.gablesurgery.com](http://www.gablesurgery.com)) or the Gables Surgery section of the NHS Choices website ([www.nhs.uk](http://www.nhs.uk)) for information about the practice? :



**1) b)** If YES, have you found the information available helpful? :



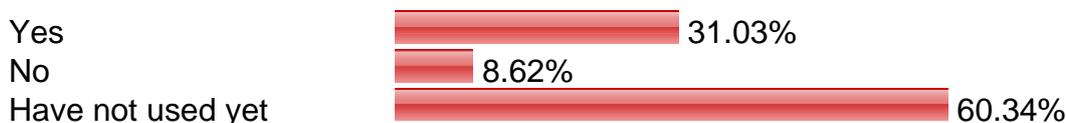
**2) a)** Are you aware of our new online services (Vision Online) for online booking and cancelling of your doctor's appointment, as well ordering your repeat prescription online? :



**2)b)** Are you aware of the new Electronic Prescribing Service (EPS) which enables the practice to electronically send your prescription to the nominated pharmacy of your choice? :



**2) c)** Have you found the THESE new services beneficial in gaining access to the practice and its services? :



3) To prevent any DNA (Did Not Attend) of your doctor's appointment, would you find it beneficial if an SMS text message reminder service was introduced to the practice?:



4) Do you feel that the practice would benefit from a suggestion/ comments box, where patients can leave their views and suggestions in regards to the practice and its services? :



5) Do you have any comments or suggestions for improvements to the surgery or the services we provide? :



**Comments:**

A number of patients who completed the survey decided to also leave their own personal comments in regards to the practice and the services provided. Due to confidentiality, we cannot publish all of these comments in this report. However, these additional comments were also used during the meeting with PPG/ PRG as further areas of discussion and to help develop ideas for improvement in the action plan.

The main focus of the comments is arising from issues and complaints in the following areas:

- + Continuity (since the retirement of Dr Ghosh and Dr Dallas's maternity leave)
- + New 48 hour appointment booking system introduced earlier in the year.
- + Surgery Opening times
- + New staff members

**b. Describe how the survey findings were reported to the PRG:**

The findings were reported to the PPG (PRG members present) representing the PRG in a meeting in the practice on 24/03/2014. They were also presented to a meeting of the practice partners on 20/03/2014 The Practice Manager was present for both of these meetings.

**c. Changes the practice would like to make in light of the survey findings:**

- + The practice would like to improve on continuity of care. The principal partner is now returning from her maternity leave. This will provide better care and continuity for patient's satisfaction of their care.

- + The principal partner has also appointed a new partner to help in taking the practice forward in delivering the new changes in the NHS.
- + With these additional GPs, the practice would like to move from providing appointments only 48 hours in advance to 1 week in advance which has been suggested by several people's comments in the survey.
- + Also, the practice would like to encourage the use of the Vision Online Service for online booking and cancellation of appointments, to improve access and reduce DNA. The practice would also like to re-introduce a SMS text messaging service and will liaise with the surgery's computer and telephone system providers to negotiate the reintroduction of this service.
- + The telephone system message when patients are first connected to the surgery has now been shortened to prevent lengthy wait on the phone and to reduce incurred charges. This is in response to the survey, which showed dissatisfaction with telephone answering and access.
- + The practice would like the newsletter and patient information folder to be a source of useful information, advertisement and update for the benefit and awareness. New services and information will be available in the waiting room.
- + Patients should increase the utilisation of the Practice Website and NHS Choices effectively as a source of communication and patient information. The practice needs to advertise these services more widely, as well as encourage patients to register for Vision Online Services and EPS (Electronic Prescription Service).

**d. Recommendations from the PRG based on the survey findings:**

- + Improve access to surgery appointments.
- + Improve access to telephone system, and reduce lengthy messages (this has now already been acted on with the help of our telephone system provider.)
- + Continuity of care
- + SMS text messaging service to remind appointments and reduce DNA.
- + Increase clinical staff levels.
- + Introduction of quarterly newsletter to improve communication.
- + To introduce a practice comments/ suggestion box.
- + To increase awareness of the practice website and NHS Choices as a source of information.
- + Introduce either a TV or loop music into the waiting area.
- + Rearrange the seating arrangement in the waiting area, to prevent patients hearing clinicians during consultations. (This has already been implemented prior to this report being published.)

**e. Agreement reached with PRG on changes to be made? Yes ✓**

**f. Changes the practice cannot make, and the reasons why:**

- + Saturday opening is still under review, pending on local CCG recommendations.

**g. Changes the practice will make:**

+ All of 4 (c) and (d) will be implemented.

**5 Agree an action plan with the PRG and seek PRG agreement on implementing changes**

	<b>Action</b> (change in practice)	<b>Person responsible</b> (to lead the change)	<b>Completion date</b> (when the change will be applied)	<b>Review</b> (what result the practice/patients saw as a result of the change)
1	All of the above recommendations	Practice Manager	31/05/2015	Feedback from PPG/ PRG meeting on the 30/06/2014

**Update on action plan for 2011/12:** *what result the practice/patients saw as a result of the change(s)*

Following on from the 2012/13 survey there were two main areas of development which were agreed in the action plan:

+ Firstly, to increase awareness of the new low cost 0203 alternative telephone number through means of advertisement around the practice in poster, appointment cards, practice leaflet, letterheads, jayex display board and NHS Choices and practice website. This has successfully been done, and there is now increased awareness among patients regarding this alternative number.

+ Secondly, to produce a quarterly patient information newsletter. This is still in development by the Gables Patient Participation Group and it is hoped that the first edition of this newsletter will be printed in April 2014.

## 6 Additional Information

### **a. The opening hours of the practice premises and the method of obtaining access to services throughout the core hours:**

The Surgery Opening times are as follows

**MONDAY:** 8.30am - 6.30pm

**TUESDAY:** 8.30am - 7.30pm

**WEDNESDAY:** 8.30am - 1.00pm (EARLY CLOSING DAY)

**THURSDAY:** 8.30am - 6.30pm

**FRIDAY:** 8.30am - 7.30pm

**SATURDAY, SUNDAY & PUBLIC HOLIDAYS:** CLOSED

### **Contacting the Practice:**

By telephone – 0844 815 1490 / 020 3667 5410 (**low cost**)

By Fax – 0844 815 1491

Website – [www.gablessurgery.com](http://www.gablessurgery.com)

### **Appointment Access**

In 2013/14 the practice has joined the surge scheme to increase appointment access during the day. For the Nurse 6 emergency slots per day (3 face to face & 3 telephone consultations) was introduced. For the doctor, 4 emergency slots (2 in the morning & 2 in the evening) were also introduced.

The practice has introduced a 48 hour appointment system to reduce DNA (Did Not Attend) and to reduce the misuse of valuable appointments.

In 2013/14 the practice has also been closely monitoring A&E attendance to identify those who routinely attend the practice and use the A&E as an alternative to compliment their query. We have increased referrals to the Community Integrated Care Service, where by multi-professional meet in the practice every fortnight to discuss the management of patients with complex needs to reduce possible A&E attendance.

The CCG has introduced this service to increase 4 new referrals for discussion per month. Also there has been increase awareness of the Community Treatment Team, who are a team of doctors, nurses and other health professional providing services for patient 18 and older providing short term intensive care and support to people experiencing a health and/or social crisis to people living in Barking & Dagenham, Havering and Redbridge to avoid unnecessary hospital admission where possible. The team also works within A&E departments at Queens & King George Hospital, where they assess and support patients to return home without hospital admission.

### **Prescriptions and Online Services**

Prescriptions are routinely done within 48 hours; the practice does not take prescription requests over the phone, due to the high risk of error; unless the person is housebound. Prescriptions can be ordered in person at reception or by post. Many local pharmacies also offer prescription collection/ delivery service, ask your chemist for more details. The Practice

is now operating EPS (Electronic Prescribing Service). Patients can now nominate a designated pharmacy they use for prescriptions to be sent to electronically. The practice is also now operating an online service called Vision Online. This allows registered patients to access the appointments system via the internet to book and cancel GP appointments, as well as requesting repeat prescriptions.

**OUT OF HOURS – “NHS 111” (formally NHS DIRECT)**

When the surgery is closed and you need to speak to/see a GP, or would like health advice, please contact the “**NHS 111 service**”. NHS 111 is a new non-emergency telephone service designed to help people access local health services. Local residents are now able to call 111 when they need medical help and advice, but it isn't a 999 emergency.

If you require medical assistance which cannot wait until the surgery reopens, **call 1-1-1**  
This service is free to call from both landlines and mobiles.

**Please only dial 9-9-9 for life threatening emergencies!**

help and advice is also available online at:

**www.nhs.uk - or - www.notalwaysaande.co.uk**

**b. The times individual healthcare professionals are accessible to registered patients under an extended hours access scheme:**

**Nurse Chelsea:** Monday & Friday: 6.30pm – 7.30pm

## **7 Publicise actions taken – and subsequent achievement**

**a. Where the report is published:**

The report is published on the practice website: <http://www.gablessurgery.com/survey.html>

Signature of behalf of practice:  \_\_\_\_\_

Name of signatory: Mrs. Fay Ghosh, Practice Manager

Date: 30/03/2014