

LONG FURLONG MEDICAL CENTRE

PATIENT REPRESENTATIVE GROUP

ANNUAL REPORT 2011/12

Practice Profile

Long Furlong Medical Centre is situated on the edge Abingdon. Our practice area includes north Abingdon and some of the nearby villages. We have a list size of approximately 8600 with a younger than average practice population. The ethnicity of our patient population is predominately white British.

We are a 5-partner practice with 2 part-time salaried GPs, 2 practice nurses, a health care assistant and a phlebotomist. We also have a reception and administration team to support our work.

The surgery is open Monday – Friday 08:00-18:30 excluding Bank Holidays. Reception is manned throughout the day from 08:30 – 18:30 and switchboard is able to accept urgent calls between 08:00-08:30.

In addition to our core opening hours we also offer GP appointments to registered patients one evening per week 18:30-19:30 and GP and nurse appointments one Saturday per month 08:00-11:30 am.

Background

In April 2011 Practices were invited to participate in a 2 year 'national initiative' to promote the proactive engagement of patients in decisions about the range and quality of services provided. To participate:

In Year 1 we were required to:

Develop a structure (i.e. establish a Patient Representative Group) that is representative of the practice population that would enable the practice to obtain feedback on services and priorities.

- Agree with the Patient Representative Group (PRG) what the priorities for patients are at the practice
- Obtain feedback on the priorities from the wider patient group through the use of surveys
- Feedback the results of the survey to the PRG and publish the survey results.
- Provide the PRG with an opportunity to consider the survey findings, prioritise areas for change or improvement and contribute to the development of an action plan
- Publicise, by way of an Annual Report, the actions taken and subsequent achievement on the practice website by 31st March.

In Year 2 we are required to:

- Repeat the process
- Publish an annual report which should build on Year 1 demonstrating how issues raised in Year 1 have been addressed.

Establishing a Patient Representative Group (PRG)

As we have a predominately young population we were concerned that busy and full lives might prevent people from coming forward to join our PRG. We therefore agreed that we should establish a 'virtual' group which would require very little time commitment from our patients. This would allow members to comment and provide feedback by email, but to ensure that we did not exclude patients, we also encouraged those without email to join by offering their feedback either via the post, telephone or face to face.

We recruited members to the PRG in a variety of ways which included advertising:

- on our practice website,
- on the patient information screen in the Waiting Room
- flyers in the Waiting Room
- Contacting patients in writing and / or by email, and
- By raising awareness of the group by talking to patients in the Waiting Room.

As we also have a number of patients registered with learning disabilities we wrote to their care manager, enclosing an easy read leaflet asking for representatives to contribute to the group.

We have 16 predominately white British members in our group (9 female and 7 male) whose ages range from 30-75 years. We are still recruiting to our PRG and are especially keen to encourage our younger patients and those whose ethnic origin is not white British to contribute to the group. In Year 2 we will continue to promote and invite membership from these specific groups to join the PRG and hope to achieve this by face to face invitation, email and in writing.

The Survey

To establish a meaningful survey in Year 1 the Practice Manager reviewed responses from previous patient surveys and feedback received from patients either in writing or via the suggestion box in the waiting room. We were able to identify a number of areas within the Practice that we considered important to receive feedback on. In addition our local Commissioning Group, South West Locality, asked that we include some questions to raise awareness of its role and engage with patients.

We provided our PRG with a list of 12 topics including opening times, appointment availability, communication, premises, reception, prescriptions, and services provided or developed by the practice and asked them for specific questions they would like feedback on.

We were asked by the South West Oxfordshire Locality to include 3 questions to help influence communication within our local commissioning group – the PRG were informed of these questions in advance of the survey being compiled.

The PRG reduced the list of questions to 7 topics which were practice specific, plus the 3 questions from the South West Locality, to include in the survey.

We generated an electronic questionnaire using Survey Monkey which would allow all patients visiting our website to complete the survey and printed 50 copies for our waiting room. The copies in the waiting room would have been replenished if they had been exhausted. The survey was advertised on our patient information screen in the waiting room and on our website and ran from 1-31 December 2011 inclusive.

The results of the survey were shared with the PRG, published on our website and hard copies made available in the waiting room (a copy of the survey is available at Appendix 1).

Priorities

The questionnaires were summarized and the PRG have been asked to prioritise the four areas that the practice should focus on; these include:

- Improvements to the grounds / car park
- Improvements to disabled access
- Improvements to the waiting room
- Enable patients to book appointments on line

Next Steps and Actions

The survey results indicated that the extended opening times are convenient for our patients however, some patients reported difficulties in obtaining appointments at times to suit them. As improving access was already a priority in the Practice's Development Plan, a decision to undertake more detailed work on lost appointments which are known as DNAs (Did Not Attend.) was taken without consulting the PRG.

The Practice Manager will table the priorities identified by the PRG for consideration by the GP Partners at their next meeting which is being held on 12 March 2012 and report back to the PRG with an action plan for 2012/13. (Please see Appendix 2)

If after reading this annual report you would like to participate in our Patient Group please contact the Practice Manager on 01235 522379 or email diana.donald@nhs.net.

We are extremely grateful to the members of our PRG who have contributed to this work. Their contributions have been invaluable.

LONG FURLONG MEDICAL CENTRE

PATIENT SURVEY RESULTS DECEMBER 2011

During the whole month of December 2011 we asked patients to provide us with feedback on the surgery. Copies of the questionnaire were made available in the waiting room and sent to patients who had requested them. We also collected results via our website using Survey Monkey.

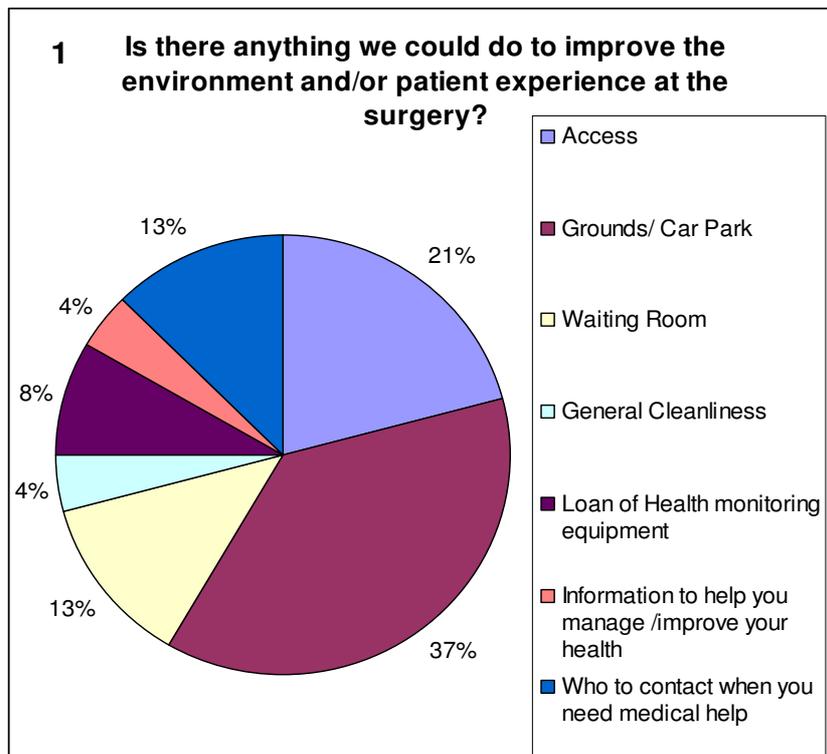
We kept the survey brief as we wanted to target specific areas that we could focus on to either maintain or improve our services. We also asked three specific questions related to Clinical Commissioning which will help inform patient communication and engagement for our local commissioning group. The responses to these three questions will be shared with the South West Locality Commissioning Group.

Fifty copies of the survey were made available in the waiting room but these would have been replenished if necessary. As we average 10,000 hits each month on our website we felt that an electronic survey would be popular and provide us with a sizeable sample.

In total we received 41 completed surveys. This was disappointing as 32 of these were collected from surveys completed in the waiting room!

Where additional comments to the questions were made we have responded to these below each question.

Diana Donald
Practice Manager
January 2012



Responses to additional comments:

Grounds & Car Park Our grounds are maintained throughout the year. In winter they are salted in freezing conditions and snow cleared. During the summer months the shrub borders are tidied monthly and the hedge cut when needed. The car park proves to be more difficult. We have very limited parking space and encourage staff who live locally to cycle to work. Since we have moved to an appointment system parking is less problematic but we acknowledge that there are times when it is still very busy. Perhaps if you are unable to park you could use the small car park at the end of Boulter Drive.

Bike racks were requested – these were installed off the car park approximately 3 years ago and are well used by our patients and staff.

Toys in the waiting room. For infection control reasons we removed the toys from the waiting room but have tried to make a 'children's area' more interesting by displaying posters and providing books. Pictures and crayons are also available (to take home with you) for a voluntary donation to the Meningitis Research Foundation. However we will consider other ways to improve the waiting room to keep children happy while they are waiting to be seen.

More male magazines in the waiting room – We are conscious that we need to keep our magazines tidy and that it is better to provide a small selection of good magazines than several that are old and tatty! We will work on this to keep our male patients supplied with suitable reading material while they wait.

Patients with disabilities have difficulties opening the surgery doors. Our reception staff are very happy to assist patients who have mobility problems or who are struggling with doors because they have push chairs. To alert staff to a need for assistance please do use the door bell on our front entrance door and once you are in the building please ask for help at reception.

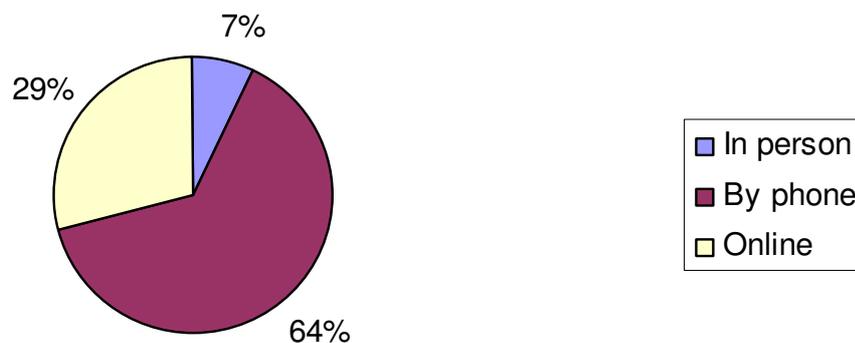
Who to contact when you need medical help – we have tried to improve the availability of this information with a 'Choose Well' display in the waiting room, providing small information cards supplied by the PCT and by providing the Choose Well and Out of Hours information on our website and the Out of Hours contact number on our telephone answer system when we are closed.

In January we will produce a display for our waiting room on who is the most appropriate person for you to see in the surgery and post this on our website too.

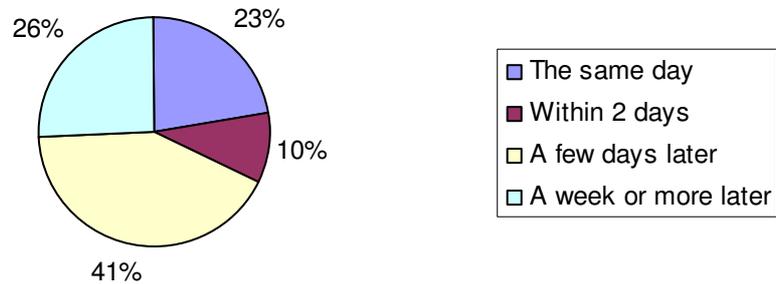
2 In addition to our normal opening times, we are able to offer pre-booked GP appointments one evening per week and pre booked nurse or GP appointments one Saturday morning per month. Are these times convenient for you?



3 Which methods would you prefer to use to book appointments?



4 Last time you wanted to see or speak to a GP or nurse, how long after contacting the surgery was your appointment?



There was a mix of responses to this question. Some respondents reported having difficulties in obtaining an appointment with their own GP, others feel the appointment system works well and their wait for an appointment has been acceptable to them.

We know that our patients liked our drop in service for ease of access but disliked the long waits. It also caused huge difficulties with parking which resulted in congestion at peak times. Unfortunately this system was extremely difficult to manage for the practice – planning sufficient numbers of GPs was almost impossible and a waste of valuable resources as we never knew how many patients would arrive that day.

The change to the appointment system in 2009 was not without its problems, but we have listened to your comments and feedback and worked hard to make changes that we hope provide an improved service. We acknowledge that there is still room for improvement and continually review our systems to provide more flexibility for our patients and have provided further information below on our appointment system which we hope is helpful.

Same Day Appointments: These appointments are reserved for patients who have an *urgent medical problem so that they can be seen the same day. The appointments are evenly distributed between all GPs who are working on that day. They may be booked throughout the day as GPs have an allocation of these during the morning and afternoon surgeries but, to use our appointments efficiently, we do book the appointments in time order i.e. early through to late.

***Our definition of an urgent medical problem is one that has occurred over night or developed during the day.**

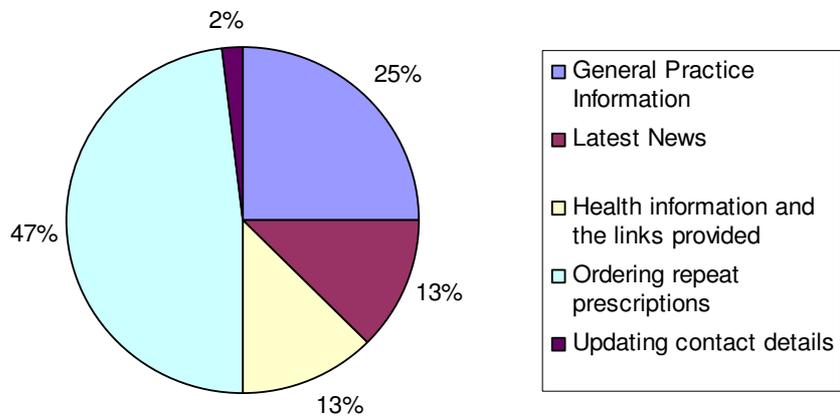
Emergency Appointments: We also have a number of emergency appointments with the Duty doctor. These appointments are at the end of morning and afternoon surgery. We also have capacity for patients to be seen earlier in the day if necessary.

Pre-bookable Appointments: These appointments may be booked up to one month in advance but unfortunately many are wasted as sometimes patients forget they have booked the appointment or no longer need it and forget to cancel!

To try and reduce the number of wasted appointments and therefore increase appointment availability, we have introduced a text messaging reminder service. If you sign up to this service you will receive confirmation of your appointment by text and a reminder of your appointment. The reminders are sent the evening before if you have a morning appointment or during the morning if you have an afternoon appointment.

5

Our website has had over 60,000 hits in the last six months. If you use our website which features are most useful?



6

If you do not use the website how would you like to be more involved and updated on current news and health topics?



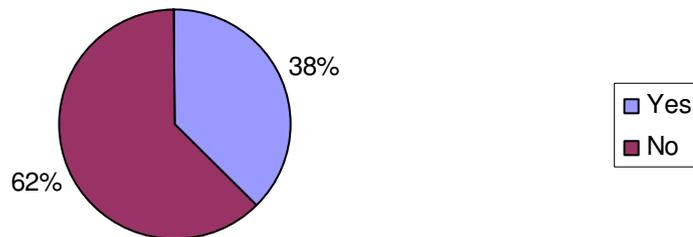
Noticeboards: Some respondents felt that our notice boards needed updating more regularly. We try to keep our displays up-to-date with topical subjects therefore they may remain unchanged for 2-3 months e.g. during the flu season we promote the benefits of having the flu vaccine – this display will usually be kept from October – December and during the summer months we focus on sun protection. If you have any suggestions to further improve the information we provide please do let us know.

Newsletter: during 2012 we will start to produce quarterly newsletters for the waiting room. Please let us know if there are specific topics you would like included.

Personal Invites for health reviews etc: We write to our patients who have a chronic disease e.g. asthma, diabetes, COPD etc inviting them in for their annual health checks and are now writing to patients aged 40-74 who are otherwise fit and well and asking them to come in for a general health check.

For our flu campaign this year we tried several different ways of contacting patients e.g. text message, email, telephone and letter. This has been very successful and we will continue to expand this method of communication.

7 If you have been referred to hospital recently did you have any difficulty arranging your appointment?



38% of respondents who have been referred to hospital reported difficulties in making their appointment using the Choose and Book system. The information provided by individuals is anonymous but their responses were reported back to the Oxfordshire Primary Care Trust who is still responsible for the commissioning of hospital services.

They have replied:

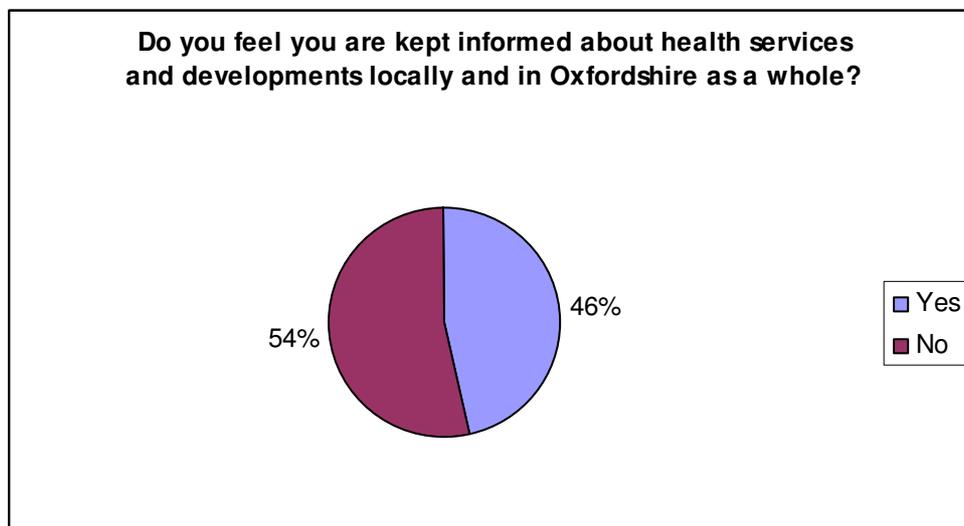
'The Oxfordshire Primary Care Trust (PCT) is aware that a large proportion of patients attempting to book their appointments have been experiencing problems, and it is something that we have been working with the Oxford University Hospital (Oxford Radcliffe Hospital site) to address. Following meetings between the PCT Choose and Book Lead, Oxford Radcliffe Hospital Deputy Director of Operations and the Head of the Patient Contact Centre (PCC) to drive the necessary changes to ensure an effective service is being provided there has been an improvement and report the following changes:

- Recruited to vacancies
- Average length of time callers wait to get through: 55 seconds
- 100% e-mails dealt with within 48 hours
- 100% voicemails dealt with within 24 hours

The PCT will continue to work with ORH to maintain and further improve on the service provided through PCC, meeting with the Specialty departments where this is particularly problematic.'

Questions 8 – 10 We were asked by the South West Oxfordshire Locality Group(SWOLG) to ask these questions. The responses will help to improve patient communication and engagement within the South West locality.

Question 8: This practice is a member of the South West Oxfordshire Locality, a group of 14 practices working together to identify and meet the health needs of its population under the governments new White Paper for Health.....



Encouragingly 46% of respondents knew the practice was part of the SW Oxfordshire Locality Group.

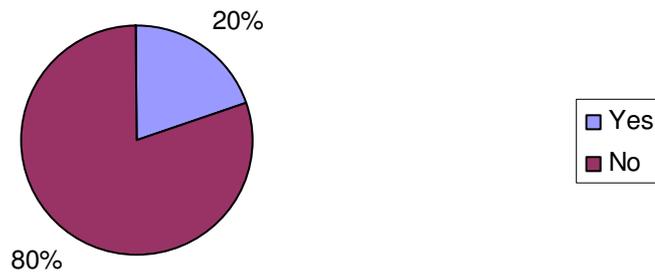
We will continue to advertise the work of the group through our website and on our communications board in the waiting room.

Q 9 How do you think the South West Oxfordshire Locality can better engage with patients and the public? Responses included:

Newsletter by email, local public meetings, one respondent felt they are doing a fine job already but one felt that NHS money is being wasted on communication!

10

**Would you like to be involved with the South West
Oxfordshire Locality Patient Group?**



Just a few respondents would like to become involved with the SWOLG Patient Group.

The patient group meetings are held quarterly and rotate around the main market towns of Wantage, Abingdon, Didcot and Faringdon.

The next meeting of the group is being held on Tuesday 31 January 2012, 10:45 am in Abingdon but the exact venue is to be confirmed.

If you would like more information on this group please contact:

Administrator, Tina Cooper, on tina.cooper1@nhs.net or telephone: 07703 505 991 or
Practice Manager, Diana Donald, on diana.donald@nhs.net or telephone: 01235 522379

Thank you for your time completing the survey. If you require any further information on the results of this survey please contact the Practice Manager, Diana Donald, on 01235 522379.

LONG FURLONG MEDICAL CENTRE

PATIENT REPRESENTATIVE GROUP

ACTION PLAN 2012/13

Following the publication of our Annual Report for 2011/12 the members of Long Furlong Patient Reference Group (PRG) were asked to prioritise four areas for improvement that the practice should focus on. The priorities included:

- Improvements to the grounds / car park
- Improvements to disabled access
- Improvements to the waiting room
- Enable patients to book appointments on line

Five members of the PRG submitted their responses which were:

Priority 1

3 votes to enable patients to book appointments on line

2 votes to improve access for disabled patients

Priority 2

2 votes to improve access for disabled patients

2 votes to improve the waiting room

1 vote to improve the grounds / car park

Priority 3

2 votes to enable patients to book appointments on line

1 vote to improve access for disabled patients

1 vote to improve the waiting room

1 vote to improve the grounds / car park

Priority 4

1 vote to improve access for disabled patients

1 vote to improve the waiting room

3 votes to improve the grounds / car park

Next Steps and Actions

The Practice Manager presented the priorities identified by the PRG to the GP Partners at their meeting held on 12 March 2012.

When setting the action plan, the Partners agreed that projects had to be realistic and within financial constraints.

After reviewing feedback from the PRG and the wider patient group, the 2012/13 Action Plan was agreed.

Priority		Action
1	Improving access for disabled patients.	Investigate automatic doors to front entrance and internal door from waiting room to consulting rooms. In the short term improved signage will be displayed offering assistance to those patients who need it.
2	Improving the grounds & car park	Discuss opportunities to improve the planting and parking with the contractor.
3	Make changes to the waiting room by providing: <ul style="list-style-type: none"> ▪ a better selection of magazines ▪ a child friendly area ▪ improve notice board displays 	<p>A selection of magazines suitable for men and women to be made available and old magazines cleared and recycled regularly.</p> <p>The cost of providing quality toys that meet infection control recommendations are to be obtained and presented for approval by the GP partners at their next meeting. NB Receptionists will ask parents with small children to review the recommendations before they are purchased.</p> <p>Notice boards: considerable work has already been done to improve the notice boards but we have noted the comments from patients and will aim to broaden the topics we cover.</p> <p>The Partners also considered replacing the seating area but this will be postponed & re-considered in the next financial year.</p>
4	Enable patients to book appointments on line.	This facility could provide excellent access for patients, however, as work is currently being undertaken on improving our appointment system it has been decided to make this the last priority for this financial year.

It is anticipated that all projects will be completed by April 2013, however, if after seeking professional advice any of the projects cannot be achieved, the practice will notify the members of the Patient Reference Group and liaise with them on alternative options.

Diana Donald, Practice Manager
March 2012