



NHS Cambridgeshire and NHS Peterborough
working in partnership

(Nuffield Road Medical Centre)

Patient Participation Report 2012/13

Produced for the Patient Participation DES 2011/2013

This report must be published on the Practice website and a copy submitted to enhancedservices@cambridgeshire.nhs.uk by no later than 31st March 2013

Introduction

The purpose of the Patient Participation Directed Enhanced Service (DES) commissioned by NHS Cambridgeshire is to ensure that patients are involved in decisions about the range and quality of services provided and, over time commissioned by their Practice.

It aims to encourage and reward Practices for routinely asking for and acting on the views of their patients. This includes patients being involved in decisions that lead to changes to the services their practice provides or commissions, either directly or in its capacity as a gatekeeper to other services.

The DES aims to promote the pro-active engagement of patients through the use of effective Patient Reference Groups (commonly referred to as PRGs) to seek the views from Practice patients through the use of a local practice survey.

The outcomes of the engagement and the views of patients are then required to be published as a Report on the Practice website.

This report summarises development and outcomes of *[Insert Practice Name]* Patient Reference Group (PRG) in 2012/13.

It contains :

1. **Maintaining the Patient Reference Group (PRG)**

A summary of the continuing recruitment process used to ensure that the PRG is of sufficient size and is as representative as possible of the Practice population.

2. **Method and Process for Agreeing Priorities for a Local Practice Survey**

The method the Practice adopted to seek the views of the PRG in determining the priority areas for the Practice to look at to include in a local practice survey.

3. **Details and Results of the Local Practice Survey**

A description of the local practice survey and how it was carried out, as well as details of the survey Results.

4. **Discussing Survey Results with the Patient Reference Group (PRG)**

Details of how the Practice consulted with the Patient Reference Group (PRG)

5. **Agreeing an Action Plan with the Patient Reference Group (PRG)**

Details of the agreed action plan setting out the proposals arising out of the local practice survey results and how they can be implemented. Details of any issues that arose in the survey that cannot be addressed in the action plan and the reasons why.

6. **Publishing the Local Patient Participation Report**

Details of where this Report has been published and also details of the Practices opening hours and how patients can access services

7. **Practice Declaration**

Confirmation that the Local Patient Participation Report is a true and accurate representation of the Work undertaken to fulfil the requirements of the Patient Participation DES 2012/13

1. **Maintaining the Patient Participation Group**

Maintain the structure that gains the views of patients and enables the Practice to obtain feedback from the Practice population via the Patient Reference Group (PRG)

DES Component 1

As part of component 1 of the DES Practices are required to establish a Patient Reference Group comprising only of Registered Patients and use best endeavours to ensure their PRG is representative.

Recruiting to the Patient Reference Group (PRG)

1.1 The Practice is required to confirm the on going process used in order to continue to recruit to their PRG (tick all applicable and provide samples if appropriate)

- | | |
|--|--|
| <input type="checkbox"/> Wrote to patients (attach letter) | <input checked="" type="checkbox"/> Put up Posters in Practice |
| <input checked="" type="checkbox"/> Offered leaflets to all patients attending practice (attach leaflet) | <input type="checkbox"/> Emailed patients |
| <input checked="" type="checkbox"/> Put information on the practice website (attach web link) | <input checked="" type="checkbox"/> Other
(please provide details in point 1.2 below) |

1.2 The Practice is required to provide details of all other methods of engaging patients and how they are ensuring continued engagement with the PRG established in 2011-12.

Right hand side of the FP10s, discussing with patients when they give feed-back to the practice, via the practice walking group. Newsletter.

Practices must strive to engage and encourage feedback from patients that extend beyond a mix of just age/sex and ethnic origin. These could include patients from marginalised or vulnerable groups such as elderly patients, patients with a learning disability or other disability and those with various social factors such as working patterns, employment status and carers etc.

1.3 The Practice is required to provide a brief summary of the patient groups represented in the Practices PRG and describe what steps they have taken to understand any changes to their own demographics in order to ensure the PRG is a representative sample of the population.

The practice PPG has had a stable core group of older patients, patients with chronic conditions and mental health problems for many years; we have through this last year been able to engage more patients. Although each meeting has a speaker, we have run a couple of meetings on Diabetes and heart disease. These meetings were attended by more patients; most of these are now active members either attending or are on the email list. The practice has also introduced a new web site, this enables patients to give feed-back through this media too.

We liaise well with the traveller liaison nurse to gain the feed-back from this harder to reach group.

The children centre attends the practice weekly so we are able to speak to the parents at that time.

Step 2. Method and Process for Agreeing Priorities for the Local Practice Survey

Agree areas of priority with the Patient Reference Group (PRG)

Component 2

As part of component 2 of the DES Practices are required to agree which issues are a priority and include these in a local Practice Survey.

The PRG and the Practice will shape the areas covered by the local practice survey. The areas covered in the local practice survey will, therefore, need to be agreed jointly based on key inputs and **building on the 2011-12 survey and results**, including the identification of:

- Patients priorities and issues
- Practice priorities and issues including themes from complaints
- Planned Practice changes
- National GP and/or Local Patient Survey issues

2.1 The Practice is required to describe the process it used to seek the views of the Patient Reference Group in identifying the priority areas for the survey questions i.e via email, website etc.

Through the year we have discussed with the group feed-back. We have also discussed the new commissioning models. The group felt that we should focus on the questions for access and patient experience as this is their main drive and the element that they want protected in the future..

The PPG feel that the practice does perform well –

2.2 The Practice is required to list the priority areas and confirm how these match those set out by the PRG

Access

Waiting times

Step 3. Details and Results of the Local Practice Survey

Collate patient views through the use of a survey

Component 3

As part of component 3 of the DES Practices are required to collate patients views through a local practice survey and inform the Patient Reference Group (PRG) of the findings.

The Practice must undertake a local Practice survey at least once per year. The number of questions asked in the local practice survey will be a matter for the Practice and the PRG to agree. Questions should be based on the priorities identified by the PRG and the Practice.

3.1 The Practice is required to confirm how it determined the questions to be used in the survey?
We used a similar survey to previous years (GPAQ). The patient group discussed in a meeting Oct last year.

3.2 The Practice is required to confirm what method(s) it used to enable patients to take part in the survey? i.e survey monkey, Paper survey, email, website link.

**Paper survey through the attendance at the practice,
On line – via the web site and through systemOne**

3.3 The Practice is required to confirm how it collated the results

The practice staff collated the results. The chair of our PPG also helped with this process.

3.4 The Practice is required to confirm the dates of when the survey was carried out and provide a copy of the survey to demonstrate how the Practice has reflected the priority areas in the questions used.

The survey was carried out in the January 2013- we continue to offer on line.

Step 4. Discussing Survey Results with the Patient Reference Group (PRG)

Provide the Patient Reference Group (PRG) with the opportunity to discuss survey findings and reach agreement with the PRG of changes to services.

Component 4

As part of component 4 of the DES Practices are required to provide the Patient Reference Group (PRG) with the opportunity to comment and discuss findings of the local practice survey and reach agreement with the PRG of changes in provision and manner of delivery of services. Where the PRG does not agree significant changes, agree these with the PRG.

4.1 The Practice is required to describe how it sought the views of the PRG on the findings of the survey and any proposed changes highlighted from it.

The practice held a meeting on 6th March 2013 , inviting the PPG to attend. Regrettably the attendance was poor, however we were able to discuss with the chair, write a summary of the findings. This has been sent to the group, we await their feed-back and will appear on the agenda for April 13.

Step 5. Agreeing an Action Plan with the Patient Reference Group (PRG)

Agree and Action Plan with the Patient Reference Group (PRG) and seek PRG/PCT agreement to implementing changes.

Component 5

As part of component 5 of the DES the practice is required to agree with the PRG an Action Plan setting out the priorities and proposals arising out of the local patient survey. They are also required to seek agreement from the PRG to implement any changes and where necessary inform the PCT.

5.1 The Practice is required to produce a clear Action Plan that relates to the survey results and attach a copy of the agreed Action Plan for 2012/13.

5.2 The Practice is required to confirm how it consulted with the PRG to agree the Action Plan and how it sought agreement from the PRG to implement any changes.
Through a meeting, email response and follow up meeting planned for April 13.

5.3 The Practice is required to advise whether there are any elements that were raised through the Survey that have not been agreed as part of the Action Plan and if so should outline the reasons why.

No

5.4 The Practice is required to confirm whether there are any contractual changes being considered if so please give details, as these will need to be agreed by the PCT.

No

Step 6. Publishing the Local Patient Participation Report

Publicise actions taken and subsequent achievement

Component 6

As part of component 6 of the DES the practices is required to publicise the Local Patient Participation Report on the Practice website and update the report on subsequent achievement.

The Practice should publicise the report as extensively as possible and ensure it appears on the Practice website **by no later 31/03/2013**.

6.1 The Practice is required to provide details of where the Local Participation Report has been published (include the link to the Practice website)

6.2 The Practice is required to provide any updates on progress against:

2011/12 Action Plan

Waiting times – some GPs have re arranged the timing of the sessions to allow catch up time for running late. The practice has also worked on continuity of care, self-management plans.

2012/13 Action Plan

The practice will continue to look at improving this- although patients value the attention and care they receive the practice does recognise this does cause longer waiting times.

The practice will undertake some further feed back from patients to understand some of the responses.

In addition the Practice required to provide details of Practice opening hours and how Patients can access services through core hours

6.3 The Practice is required to confirm Practice opening hours and give details on how Patients can access services during core hours (8am-6.30pm)

The practice doors are open from 8am to 6pm Monday- Friday (Wednesday extended hours 7am – 8.40pm)

The telephone lines are open from 8.30am – 6pm Monday to Friday

The practice does not close the door or telephones during the day.

Services can be accessed

Face to face

Telephone

24 hour automated appointment and prescription line

On line appointment/prescription/feedback

Where a Practice is commissioned to provide Extended Hours the Practice is required to confirm the times at which patients can see individual health care professionals

6.4 The Practice is required to provide details of any extended hours provided and details of access to Health care Professionals during this period.

7am – 8am appointments with GPs – bookable 4 weeks in advance

6.30 – 8.40 pm 2 GPs and 2 nurses

Appointments for GPs are bookable 4 weeks in advance, on the day, face to face, on line, 24 hour automated system.

7. Practice Declaration

The Practice confirms that the above report is a true and accurate reflection of the work undertaken as part of the Participation DES 2011/13 .

Signed and submitted to the PCT and published on the Practice website on behalf of the Practice by:

Name:

Signed:

Designation

Date:

FOR PCT USE ONLY

Date Report Received by the PCT: _____ Receipt Acknowledged by: _____

Report published and evidenced on Practice website by required deadline: _____