

**WOOTTON MEDICAL CENTRE  
PATIENT PARTICIPATION REPORT  
2012-2013**

## Wootton Medical Centre

### Patient Participation Report 2012-2013

#### Introduction;

We have had a Patient Participation Group at Wootton Medical Centre (WMC) for some years. This group was formalised during 2011, with the appointment of a Chairman who is a registered patient as are all the lay members of the group. Formal terms of reference were drawn up and a code of conduct established. The group also changed its name after group discussion and democratic agreement to '**Wootton Patient Supporters**' (**WPS**)

At present we continue to have only an actual patient reference group but may extend this to include a virtual group as well in the future.

During 2011 and 2012 **WPS** as group have been involved in recruiting new members, supporting WMC in developing and performing a patient survey and in reviewing the results and discussing potential changes and the actions required to address those changes. The **WPS** have been very supportive during the Flu clinic season in autumn of 2011 and 2012. They have organised a very successful Christmas raffle for two consecutive years raising funds for equipment that will benefit patients. With the funds that the **WPS** have raised they have purchased a Wheelchair for use in the surgery. A Carbon monoxide monitor to help with smoking cessation and a new dermatoscope and dermatology atlas to help with skin conditions have been purchased this year.

In 2011 we joined NAPP ( National Association of Patient participation)

During the year 2012-2013 our Chairman has attended the East & South Locality Engagement Group

The Doctors and all staff at WMC are very grateful for the time and effort members of **WPS** have put into supporting their practice in so many ways during the year 2012-2013,

#### Profile of ' Wootton Patient Supporters'

During the year 2011-2012 we had fifteen members of WPS with all lay members being registered patients. During the year 2012-2013 we have had over twenty registered patients attending meetings and contributing to **WPS**. Due to individual circumstances and life events not all members are able to attend all meetings and there is a constant flow of members into and out of the group. We also have a lead GP Dr S Davies and our Practice manager and senior practice nurse providing input and support from the clinical and

administrative members of the practice. Since the retirement of group's secretary during 2012 the practice manager has taken on this role.

Of the twenty registered patients attending meetings in the last year six have been men one of whom is our Chairman. The majority of our members are over fifty we have one attendee under 20 at present whose input has been very helpful.

Our members represent a wide range of our patient population. We have members who are and have been carers, who have experience of chronic disease management and consequently the review systems within the practice, prescription systems, recall and appointment systems. One member works as a voluntary driver for patients and they are able to provide helpful advice. Our Chairman is also a governor of the School which services our practice area. We have members who are retired and those who work in both the public and private sector, members who work with children and a student. We have representation from our ethnic minority also our disabled population.

We are aware as a group we still need to encourage more young men and women and members with young families to join us. We are also aware that people's lives are busy and that they have many commitments and as a consequence may not feel able to give yet more time to join us. We shall continue to encourage all patients to feel welcome.

### **Steps taken to recruit members to 'Wootton Supporters Group'**

Since 2011 as a practice we have, with the members of '**Wootton Patient Supporters'**(**WPS**) help, tried to encourage new members, and for a wider representation of our practice demographic profile to join the group. We have displayed posters in the Medical Centre and also in local shops and public notice boards, Group members have taken these posters also and displayed them in areas they felt would make our patient population aware of the group and be inspired to join us. They displayed the posters in community centres, local libraries and notice boards of their choice. We have encouraged opportunistic recruitment by all clinical and reception staff when patients attend the surgery. Our newsletters also invites new members.

An invitation to join the group is given to new patients as they register with Wootton Medical Centre

Direct invitation to join has been undertaken by all GPs and the practice manager informed if any patients show an interest so that contact can be made again before the next meeting to rekindle that interest.

There is an invitation to join **WPS** on the practice website.

To try and attract more members we have developed an invitation card which we have attached to the repeat prescriptions of patients receiving repeat prescriptions who are in underrepresented demographic groups. Unfortunately this has failed to generate any response.

Before each meeting an invitation to all patients to attend is clearly displayed in the surgery building.

Over the years 2011-2013 we have actively been recruiting new members as outlined. Direct invitation of patients by clinicians and **WPS** members is the most successful method of encouraging new members.

### **Wootton Medical Centre Practice Survey 2011-2012**

In the patient participation report of 2011-2012 the Patient survey was discussed at length and specific action plans drawn up and over the last year with the **WPS** these areas have been addressed:

**1, Waiting room;** In the 2011-2012 survey this was an area of relatively poor performance and this was discussed with **WPS** and it was decided no major structural change was possible owing to space constraints and this was agreed by **WPS**. It was agreed that the clinical staff would work hard to improve waiting times and aim to reduce pressure on patients in the waiting area.

**Outcome;** During 2012 the clinical staff have worked on this area but practice and patient demand had increased, sometimes clinicians run late due to the unpredictable nature of patients problems. The waiting room continues to be an issue in the 2012-13 survey

**2, Magazines;** the **WPS** group decided no magazines were better than old used ones.

**3, Surgery Access;** Steps were taken after the meeting to increase patient awareness of appointment times

**4, Improving access;** Although in the 2011-12 survey ability to see Dr of chose and telephone access were above the national average steps to improve access further were to be undertaken.

**Outcome;** Dr Davies under took a trial of using telephone consultations over a two week period and audited the results. The results showed patients were pleased with the access and telephone consultations. However the manner in which the trial was done resulted in increased consultations during the trial period in addition to the normal booked consultations and was not feasible to continue long term. The audit and the results were presented to and discussed within the practice and **WPS**. The

use of telephones has increased but we have not moved to a formal telephone triage system as in some practices.

## **Wootton Medical centre Patient Survey 2012-2013**

### **Development of Patient survey 2013-13**

The proposed Practice survey was discussed at a **WPS** meeting in October 2012. After group discussion it was decided to use the same survey as in 2011; The IPQ (Improving Practice Questionnaire) with analysis by 'cfep uk surveys. This is a standardised questionnaire covering a wide range of service issues including, access, reception provision, clinical care provision. It is easy to understand and complete. The group had experience of using it before. Comparison of performance year on year would be helpful. After agreeing on the survey to be used the **WPS** were fully included in the decision of when and how the survey would be conducted. After full discussion with the group at the October meeting it was decided to run the survey after the Flu vaccination clinics had finished and before Christmas. The group again agreed to provide support during the survey period.

IPQ= Improving practice questionnaire

Cfep= client focused evaluation programme surveys ltd, a survey company specialising in patient and colleague feedback for health professionals working in the NHS

### **Patient Survey at Wootton Medical centre 2012-13**

After agreement to use the IPQ survey by **WPS** the survey was organised.

#### **Methodology;**

The required numbers of questionnaires for the survey to be statistically significant were provided by Cfep. Doctors Moore, Penfold and Davies were included in the survey as in 2011 and on this occasion so was Dr A Hart who acts a locum at WMC. The nurses were not included on this occasion. A total of 224 questionnaires were completed.

A specific week in December was chosen by the practice manager to carry out the survey, this was before Christmas. The Doctors were not made aware of this date so that the survey would be a true reflection of their normal service. The survey was carried out without bias or prejudice and all patients attending for a Doctors appointment during the survey period were offered the opportunity to take part. The responses on the questionnaires were anonymous. Completion of the questionnaires was voluntary and if a patient declined the opportunity to complete one this was respected by the survey administrators .

During each surgery session a survey administrator (either a **WPS** member or reception staff member) was placed in the surgery foyer, meeting and greeting all patients inviting all those attending for a doctor appointment to complete the IPQ questionnaire after their appointment. During some sessions members of the **WPS** helped the reception staff carry out this role. The questionnaires were held on clip boards and the survey pens were provided.

The questionnaires were colour coded with a blue, red or yellow mark, denoting the colour coding used within the practice for each Doctor. Completed forms were placed by the respondent in the same colour coded envelope and placed in a box which was, when all the questionnaires were completed forwarded to 'cfep surveys' for analysis by recorded delivery. All 224 questionnaires were completed in all.

### **Results of Patient Satisfaction Survey 2012-13**

The results of the Practice survey were returned from cfep in two formats; a poster giving a graphical and visual display and also detailed report of results to each question asked with comparisons with national results and a full list of participants comment. Each clinician also received a detailed individual report of their own individual results.

#### **Informing patients of results**

The poster report depicting the survey results for the practice as a whole was displayed in the waiting room along with an open invitation to attend a meeting of **WPS** to discuss the results. A full copy of the report is kept in reception for all patients to read should they want to.

#### **Meeting with WPS to Discuss Survey Results**

A meeting of Wootton Patient Supporters was held on 14 03 2012 was held to discuss the survey that had been completed by 224 patients. The results had been reviewed and discussed at a meeting of all members of WMC practice prior to this.

- At the meeting lead clinician Dr Davies thanked the group very much for their support before and during the survey procedure and for attending the meeting
- Copies of the graphic results, full report along with participants' comments were reviewed and discussed. The methods used by cfep to analyse the results were reviewed and discussed also. The questions receiving blanks/spoil responses were also reviewed and possible reasons discussed.
- The results of the survey were very good and 92% of all patient ratings about the practice were good, very good or excellent and overall mean

satisfaction 81% (national average 73%.) All parameters reviewed in the survey except one (comfort of waiting room) were above the national average and all except that one were in the highest 25% of all mean scores nationally. The comfort of waiting room 65% compared to national average 66% was in the middle 50% of all means nationally.

- Within the group meeting the results were compared to the previous performance in 2011. Although still very good and well above the national average in all parameters except waiting room comfort they were less good than 2011 in all parameters except seeing practitioner within 48 hours which was the same (75% mean score). The **WPS** members present expressed their feelings that the service supplied was very good. The areas of the survey covering clinical provision and the clinicians were again well above the national average and this was discussed within the group.
- All the 2012 result except seeing practitioner within 48 hours were better than the score obtained in 2007.
- Participants comments were reviewed
- The results had been discussed at practice meeting previously and suggested changes were discussed.

### **Areas for change & improvement & proposals for change made with WPS**

**1, Waiting room;** The waiting room was again an area of relatively poor performance That is 65% just below national average (66%). This area was also commented on by on by survey participants.

- The waiting room comfort has been a problem previously. It is relatively small has had plastic seats some with arms, a small play area and a clear calling system. It is visible in case of emergency from reception, it is well ventilated. WPS members are aware of the need for fixed seats for safety and the need for cleanable seats, The group agrees these parameters should not be changed.
- New safety blinds to replace the present vertical blinds will be ordered for the waiting room and all clinical and administrative areas. This will improve safety and address comments made in survey. This plan was welcomed by **WPS**

- Clinicians will continue to work on keeping to appointments and improving availability in order to improve the service provided again and reduce waiting room pressures.

## **2, Appointment systems;**

- Survey participants had requested improved reminder systems for appointments. The group discussed this. The practice is aiming to switch computer systems in the near future and this clinical system includes automatic text reminders for all appointments to the patient's mobile phone. This progress was welcomed by the **WPS** group. The interim use of a pay as you go mobile to text reminders was discussed with in the group but rejected on the grounds the amount of time it would take for reception staff, taking them away from other important duties and the risks of calls back for help/advice to an un manned phone.
- The introduction of a new checking and calling system at the same time as the computer upgrade was discussed at the suggestion of the practice. This may help waiting room congestion, this plan was also welcomed by **WPS**.
- Dr Davies will keep the group updated on progress at future meetings.

## **3, Out of hours contact;**

- Concern about how to contact out of hours had been expressed;
- This number is changing soon to 111. The emergency use contact number is on the surgery phone .
- Placing the number in Village notice board was discussed and agreed upon provided the parish council agree to the surgery request to do this.

Meetings with **WPS** will continue to take place to continue to move forwards and improve patient care and services at Wootton Medical Centre

ESD. March 2013.

Attachments.

Example open invitation to meeting

Copy of summary of action plan display for patients

Copy of opening hours and extended hours

Copy of repeat prescription invitation attachment

Copy of survey results( on website); graphic document see document on website.

**Calling all Patients of Wootton  
Medical Centre**

**Wootton Patient Supporters Group**

**Next meeting  
Thursday 18<sup>th</sup> October at 6.30pm  
held at the surgery**

**WHY not join us?**

**Please leave your details at reception  
if you would like to attend.**

Copy of report displayed in waiting room of action plan

## WOOTTON MEDICAL CENTRE

### Actions following Patient satisfaction Survey

Thank you to all who took part in our Patient Satisfaction Survey in December 2012. A poster displaying the results has been in the waiting room since February. We discussed the results and comments with '**Wootton Patient Supporters'** (WPS) your patient participation group on March 14<sup>th</sup>.

As a practice we were very pleased with the response that 92% of replies in the survey were good, very good or excellent with an overall mean score of 81% which is well above the national average of 73%. The results were not quite as good as 2011 when the figures were 93% and 84%. The parameters reviewing the clinicians were all high and well above the national average. WPS were also pleased with the results. Thank you also for the positive and constructive comments. We are always keen to improve our service further and address your concerns.

### **Waiting room facilities**

The waiting room is an area of concern with a score of only 65% satisfaction just below the national average (66%);

- The furniture in the waiting room is functional, purpose built with fixed cleanable seats for your safety and we are unable to change it. WPS understand this
- Blinds; concern was expressed about the blinds. This is being addressed and we will be replacing the present blinds with new safety blinds shortly
- Clinicians will continue work to reduce waiting times

### **Appointment reminders**

- Appointment reminders was raised in the survey, this has been discussed and being addressed. The surgery will be upgrading its clinical

computer system during 2013. The new system has an automatic text reminder service for mobile phone users which we intend to make use of. This will help remind and help to reduce non-attendance for appointments.

### **How to contact the out of hours service**

Concern was expressed about how to access the out of hours service

- The surgery will approach to Parish Council to obtain space in the notice board on the fence with contact details
- The surgery phones carry clear instructions of then numbers to ring when calling out of hours
- The Out of Hours number is changing to **111** for all calls and queries. Information about this will be displayed clearly and be on the surgery phone messages

If anyone would like to see the detailed survey results there is a copy in reception. Dr Davies or Mrs S Connolly will always be happy to answer any queries

As a practice we are very grateful to the hard work and support **WPS** have given to us during the whole survey process and throughout the year. They have supported us with preparation for the survey while it was being performed and by giving invaluable feedback on the results.

If you would like to join **WPS everyone is always welcome.**

ESD March 2013.

Copy of invitation attached to repeat prescriptions

**Calling All Patients  
of  
Wootton Medical Centre**

**Do You Want to have an input into the service you receive?**

**Why not join**

**Wootton Patient Supporters the Patient Reference Group.**

**Contact**

**Mrs S Connolly or Dr Davies on 01604 709933**

Copy of invitation placed next to results poster inviting people to open meeting of Wootton Patient Supporters

**Would you like to know more about  
these results?**

**Why not come along to the  
Wootton Patient Supporters Meeting  
held here**

**On**

**Thursday 14<sup>th</sup> March**

**at 6.30pm**

Table of core and extended opening hours.

### Core and extended opening hours at Wootton Medical centre

Day of week	Patient access is via telephone (01604709922/933) or in person at any time during advertised opening hours. the surgery does not close at all during advertised opening hours. Access for prescriptions only can also be via letter or email; <a href="http://www.woottonmedicalcentre.co.uk">www.woottonmedicalcentre.co.uk</a>	
Monday	0745-1830 hours	Extended hours early morning surgery 0745-0800. Bookable appointments only, Dr C Moore
Tuesday	0800-1830 hours	
Wednesday	0800-2100hours	Extended evening hours 1830-2100hours. Bookable appointments only with Dr C Moore
Thursday	0800-1830 hours	
Friday	0800-1830 hours	