

Patient Participation Directed Enhanced Service
2012/13 Report
Year 2

Practice Details

Practice Name	Dr K Gupta Practice
Practice Code	Y00050
Completed By	Michelle Farrell
Contact Telephone Number	01942 481815
Email Address	Michelle.farrell@gp-y00050.nhs.uk
Practice website address	www.drkgupta.co.uk

Component One – Develop a Patient Reference Group

<p>Patient Reference Group profile - <i>This section only requires completion if a PRG was not established in Year 1 or a patient participation report was not submitted in Year 1 (2011-12)</i></p>		
<p>Show how the practice demonstrates that the PRG is representative of the practice population by providing information on the PRG profile</p>		
Number of Face to Face Members		
Number of virtual members		
Age & Sex breakdown	Male	Female
Under 16 -		
17 – 24 -		
25 – 34 -		

35 – 44 -		
45 – 54 -		
55 – 64 -		
65 – 74 -		
75 – 84 -		
Over 84 -		
Ethnicity		
White		
Mixed		
Asian or Asian British		
Black or Black British		
Chinese or other ethnic group		
Other (e.g. no of carers/ no of unemployed/retired etc)		
Differences between the practice population and members of the PRG		
Please describe variations between the practice population profile and the PRG profile		

If there is a variation what did the practice do to ensure that every effort was made to get a representative number of patients on the group?

Changes to PRG Membership

Describe any changes to your PRG membership in Year 2 i.e. have any members left the group / have any new members been recruited?

During Year 2 of the DES one of our PRG members left due to work commitments, his shift was changed to start at 1am (delivery driver) so he was unable to commit to meeting at 6pm, it was agreed that should his shift pattern change in the future then he would contact surgery to rejoin the PRG.

Also we recruited a new PRG member so the Practice currently has 7 members who attend the bi-monthly meetings held in Practice.

Component Two – Agree with the PRG which issues are a priority and include these in a local practice survey

Priorities

Please describe how the PRG agreed what the priorities were for this year e.g. areas to be included in the local practice survey

Discussions took place with the PRG during the bi-monthly meetings which are held on a Monday evening at 5.45pm, regarding the Annual Practice Patient Survey. Discussions took place around what type of questions were to be included in this year's annual survey. Questions to be included in the survey (for example) getting through to the practice on the telephone, how do you rate our receptionists, GP & Practice Nurse clinical knowledge and attitude towards patients, opening times, and general comments etc. A list of priority questions was devised and a questionnaire was produced.

This was then agreed at a further PRG meeting and signed off by all PRG member's present in order to allow photocopying and hand out of the questionnaires to all patients who attended surgery over a 2 week period.

Component Three – Collate patient views through the use of a survey

Patient Survey

Describe how the questions were drawn up for the survey

As above, these questions were initiated by the PRG via the practice PRG meetings which are held bi-monthly. Over a period of 3 months the questions were agreed by all members and decisions on what to ask in the annual survey were agreed by comparing the questions asked in the previous years' survey.

One of the PRG members kindly agreed to collate all the questions onto a spreadsheet to make it easier for completion. Once this was done it was e-mailed to the Practice Manager and then signed off for completion.

How was the survey conducted? (e.g. how many surveys were distributed, how were they distributed, how many were completed)

The survey was conducted by the practice staff handing out approximately 140 questionnaires over a 2 – 3 week period to capture as many patients views as possible. The questionnaires were handed out to all ages including the under 20s and over 75s to capture a wide range of age, and sex of our registered patient list.

Out of 140 approximately handed out for completion, approximately 20 were incomplete – for example some questions were not answered, these were excluded from the survey as we wanted to get an accurate percentage out of 100. In total 100 questionnaires that were fully completed were analysed by one of the PRG members and collated for discussions at the PRG meeting held on Monday 11th March 2013. Minutes of this meeting attached. Also copy of the questionnaire attached.



PRG Minutes 11 3 13



PRG Survey
Questionnaire

What were the survey results? (*attach copy of results*)

Analysis of the survey results attached



DES PPG Colation of
questionnaire

Describe any other methods in which the views of registered patients were sought

No other methods used

Component Four - Provide the PRG with an opportunity to discuss the survey findings and reach agreement with the PRG on changes to services

Agreed Actions

How did you provide the PRG with the opportunity to comment and discuss the findings of the local practice survey?

The practice Manager provided the PRG members with the results of the local patient survey undertaken in Practice in February 2013. These results were discussed at our PRG Meeting held on 11th March 2013, copy of this meeting minutes attached above.


Were there any disagreements?

There were no disagreements

How were any disagreements resolved?

None to resolve

Component Five – Agree an action plan with the PRG and seek PRG agreement to implementing changes

Action plan
<p>How did you agree the action plan with the PRG?</p> <p>The action plan was agreed by the Practice with the help of the PRG members. The results of the patient survey were very positive with only one area to be improved upon, discussions took place regarding waiting times to see Doctor.</p>
<p>What did you disagree about?</p> <p>There were no disagreements raised following discussions regarding waiting times to see Doctor, all actions were agreed by all PRG members.</p>
<p>Are there any contractual considerations to the agreed actions?</p> <p>The only contractual considerations were for Doctor to start his morning surgery slightly later than previously undertaken, therefore morning surgery would finish slightly later than previously. This action point will be monitored throughout the next 12 months according to patient demands for access.</p>
<p>Please include a copy of the agreed action plan including a summary of any further action to be taken</p> <p> PRG Action Plan 2013</p>

Component Six – Publicise actions taken and subsequent achievements

Local patient participation report

Describe how the report was publicised and circulated to patients

PRG members – copies of the report handed out to members at the PRG meeting held in Practice on 11th March 2013

Results / Report published on the practice website

Jayex – ACD (Automated Caller Display) board with a thank you message to all patients who participated in the annual in practice survey, and a message to say the results are available on reception by request.

Please include a copy of the report



PRG Practice Report
2013

Please provide your website address and a link to where the report is located on the practice website

The practice website is
www.drkgupta.co.uk

the report and results can be accessed by logging into the practice website and navigating to the PRG page

Opening Hours

Confirm opening times of the practice premises and method of obtaining access during core hours. This should include arrangements under extended hours where applicable.

Monday	08.00	20.00 (inc Ext Hrs)
Tuesday	08.00	18.30
Wednesday	08.00	17.00
Thursday	08.00	18.30
Friday	08.00	18.30

No closure of surgery during lunch times, face to face access for patients during the above times, only exception is answer phone message on Monday – Friday from 13.00 – 14.00 to enable staff to do admin work, filing etc. During this 1 hour lunch time message the patients are directed to ring another line within the Practice if urgent so that staff will answer the call and deal with accordingly, this does not advise patients to ring another external number during core hours.