

# **Manor Medical Practice**

## **Local Patient Participation Report Year 2**

**Report published March 2013**

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## **Introduction**

Manor Medical Practice is a large and busy practice with around 9000 registered patients and based at two sites. We hope that by engaging more with our patients we can improve the service we provide by understanding more about the issues faced. We made the decision to use a virtual patient participation group (PPG) to increase the number of potential members and widen the membership. The group was first set up in 2011-2012 and membership has remained open to all Patients during 2012-2013. The group has participated in surveys this year and their input has been invaluable in helping the Practice to implement the action plan of 2011-2012 and in forming this year's action plan.

During the period March 2012 – date we have continued to advertise the group and invite new members to join, we have successfully increased our membership on 2012 and we have over active 70 members.

The Practice looks forward to working with the group for some time to come.

## **Profile of Group Members**

Manor Medical Practice currently has a list size of around 9,000 patients. Our current patient group has 77 members, around 0.85% of the practice population.

In the past the Practice has had a Patient Group which was face to face. The success was limited; numbers were small; it was difficult to find a time and location suitable for meetings; the group mainly comprised older female patients. Thus, we continued with the approach of making the group a virtual group.

During the past twelve months we have recruited using a mixture of the following methods:-

- Continuing Poster Campaign in waiting room and surgeries
- Links on Website and NHS Choices
- Targeted text messages to females aged under 44 as this group of patients was the most under represented group in the year 2011-2012
- Targeted text messages to all patients aged 16-25

We continued to offer a choice of methods for group members to communicate with us to ensure that we did not exclude patients who may not have access to the internet and email:

- Online survey completion
- Paper based survey completion

Telephone based survey completion was removed as an option due to the uptake being very small (one patient only).

The majority of our group members prefer to complete postal surveys.

## Male /Female profile

Total	Male	Female
All Patients	50%	50%
Patient Group	38%	62%
Attendance	47%	53%

Table 1 – Male/female profile

As can be seen in table 1 above, we have a higher female to male ratio in the patient group than the practice population. There is an approximate correlation with attendance patterns over the twelve months to March 2013 where we have a higher number of females attending for appointments than males.

## Age profile

Total	16 or under	17-24	25-34	35-44	45-54	55-64	65 or over
All Patients	17%	10%	13%	13%	16%	13%	18%
Patient Group	0%	4%	8%	18%	20%	23%	27%
Attendance	16%	9%	13%	12%	16%	14%	20%

Table 2 – Age profile

Despite targetted efforts to encourage younger patients to engage we do still have a predominantly older group of patients and remain under represented in the under 25's age group. However, the group does contain parents so we hope that the views of the the younger population are still able to be put across via these members. Attendance patterns across the age bands show a correlation to the age bands of the practice population.

## Ethnic profile

Ethnic category	All Patients	Group
British or mixed British - ethnic category 2001 census	81.88%	91.14%
Other White background - ethnic category 2001 census	7.19%	5.06%
White British - ethnic category 2001 census	7.44%	2.53%
White Irish - ethnic category 2001 census	0.20%	1.27%
Other ethnicity	3.29%	0%

Table 3 – Ethnic profile

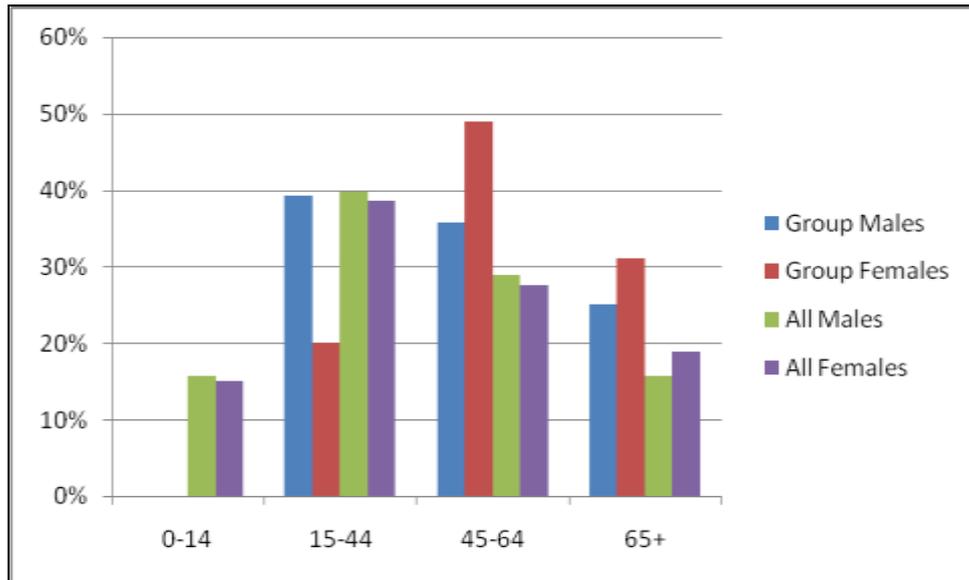
As can be seen in table 3 above, the ethnicity of the group is broadly representative of the ethnicity of the practice population - over 96% of the population is currently represented.

## Balanced Scorecard

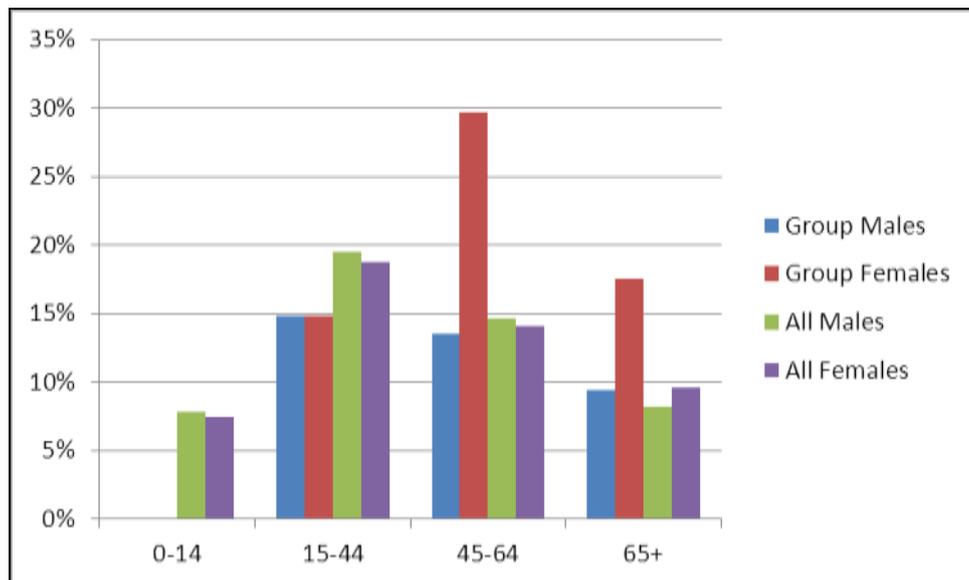
The scorecard (see below) shows the age sex profile of group members compared to the entire patient population.

It can be seen quite clearly that we have successfully addressed the under representation of females in the 15-44 years age group from 2011-2012.

However in both the 45-64 years and 65+ years age groups we continue to be disproportionately represented by females.



Age / sex profile of group using balanced scorecard bandings – 2011/2012



Age / sex profile of group using balanced scorecard bandings – 2012/2013

## Further Group Development

We will continue to focus on recruiting specific groups in the coming year.

We will do this by:

- Focus on males aged 65+
- Continue to encourage families with young children to join the group

## Agreeing the priority areas

In the early part of the year the group worked closely with the Practice on the action plan and additionally conducted a survey relating to one of the remaining priority issues identified during the previous year – missed appointments (DNA's).

On completion of the points in the action plan the group was then invited to suggest further priority areas for discussion.



Here is a selection of some of the suggestions we received:

"The implications for the practice of the governments' changes to the NHS. How do they effect

- 1) The relationship with the patients,
- 2) The relationship with the local hospitals,
- 3) How is the practice proposing to deal with the extra work entailed?"

"For debate – length of time you have to wait for an appointment."

"Errors / over prescribing by local pharmacists. Interested to find out if any/many patients experiencing this and costs of waste and charges to practice/NHS"

Responses were grouped by topic and the two most common ones were appointments and prescribing.

## How views were obtained

We created a survey based on the two top priorities identified by the group and invited all patients attending the surgery over a period of two weeks to complete it. We had a great response and 121 patients completed surveys for us.

The survey and results were then sent to the group for comments.

### Survey Results



#### **Appointments:**

70% think that nurse triage is working for urgent appointments  
84% usually have to wait more than a week for a routine appointment  
78% think a week is the longest acceptable time to wait for a routine appointment  
83% will see any GP to be seen earlier  
15% of patients were unaware of the difference between a routine and an urgent appointment.

#### **Prescriptions:**

88% of you have not had problems with prescriptions  
85% are not aware of the different types of items of prescriptions  
92% are aware of the 48 hour turn around for repeat prescriptions  
70% know that non regular items may take longer than 48 hours  
92% know that you need a review with a GP for some repeat medications  
83% read the messages on prescriptions

The following is a selection of the comments we received:



"Have you considered shorter waiting times for children?"

- ***We offer minor illness appointments with the nurse for children***

"I don't need routine appointments."

"Clarification on what is urgent, non-urgent and routine please."

"Most patients think their need to see a Doctor is urgent!"

- ***The practice needs to raise awareness with patients on the types of appointment we offer***

"Items are frequently out of stock at the pharmacy."

## Putting together the action plan

The survey results were discussed by staff at the Practice and several action points were suggested as ways to address the issues. There was a discrepancy between the groups' priority issue of "problems with prescriptions" and the local practice survey results which indicate that 88% of patients have not experienced problems. The Practice decided to take it forward as an action and will ask the group for help in creating a wider survey on prescriptions.

The following action plan was put to the group for approval:

**Action Plan**



1. Assess how many appointments each week are taken as urgent / routine and investigate ways to rebalance this
2. Produce patient information leaflets regarding urgent and routine appointments
3. Produce patient education leaflets on types of prescription items
4. Investigate the types of problem that patients are experiencing with the pharmacies and see if there are any actions we can take to help reduce these problems

The action plan has been approved by 100% of respondents.

The following is a selection of the comments we have received regarding the plan:



"Is it your intention to let us see drafts of the proposed patient information leaflets? I'm sure they will be well prepared but I would like to check they are user-friendly so to speak" .

- ***The leaflets will be circulated to the group for comment and approval prior to general release.***

"It looks like a good action plan."

"Yes I approve of the plan of action. I actually do not have any issues getting in the Doctors, but a fact sheet on what the difference of routine & urgent is a good idea"

"All sounds like a good Action Plan to me. I am amazed how many people do not know what they are taking & why"

- ***We hope to keep patients better informed in the future***

## Implementation



<b>Action</b>	<b>How it will be implemented</b>
Assess Appointments	The Practice is to investigate if any tools are available to help with the assessment of appointments. News on progress will be sent to the group.
Information Leaflet regarding appointment types	We will create an information leaflet for patients regarding the different types of appointment. This will be sent to the group for comment, review and approval prior to publication. We expect to complete this by September 2013.
Education leaflet regarding prescriptions	We will create a leaflet explaining prescriptions and the types of item found on them. As above, this will be sent to the group for comment, review and approval prior to publication. We expect to complete this by September 2013.
Prescribing issues	Create a further in-depth survey relating to the types of issues that patients are experiencing and will invite the local pharmacies to comment. We expect to run this survey late 2013.
Revisit actions from 2012	We will also revisit the actions in the plan from 2012 to see if those that are as yet incomplete can be moved forward.

## **Actions taken 2012/2013**



### **Online booking**

This service was successfully piloted by the group in February 2013 and is now live and available to all Patients.

We have links on the website and are currently waiting for marketing materials to be sent to us from EMIS so we can have a poster campaign in the surgeries advertising the service.

### **Appointment Reminders**

This service is now live and used by 47% of Patients. However, there has been a disappointing reduction in DNAs (less than 7% reduction).

### **DNA Policy created**

The group has been surveyed on their opinions and suggestions relating to how the Practice should deal with Patients who do not attend for appointments. The Practice now has an agreed DNA policy and we hope that this, in-conjunction with the appointment reminder service will help to reduce the number of missed appointments which is still a big problem for the Practice.

### **Saturday Sessions/Appointment Patterns/Surgery Times**

The untimely death of our senior Partner Dr Higginbotham-Jones in 2012 led to an unforeseen change of clinical staff and a much higher use of non-regular clinicians in the Practice. This has meant that we have been unable to make as many changes to appointment times as we had hoped to.

We have continued to offer one Saturday per month but have as yet been unable to offer more appointments on these days.

We have made some changes to appointment availability but have not yet surveyed the Patients to canvas opinion on these changes.

The website and NHS Choices have been updated to reflect current appointment times.

The Practice will see a new full time GP start in March 2013 and a further part time GP start in June 2013 and we hope to revisit these actions then.

## **Actions to be taken 2013/2014**

### **Assess Appointments**

- Investigate use of tools to estimate demand
- Perform a demand analysis exercise
- Look at solutions to try and match the unmet need

### **Information leaflet on appointments**

- Create an "Everything you need to know about appointments at Manor Medical Practice" leaflet
- Circulate to the group for comment and review
- Revise and circulate for approval
- Publish to practice population and make available on the website

### **Education leaflet on prescriptions**

- Create an "Everything you need to know about prescriptions at Manor Medical Practice" leaflet
- Circulate to the group for comment and review
- Revise and circulate for approval
- Publish to practice population and make available on the website

### **Pharmacy issues**

- Ask the group for further input regarding issues and create a survey
- Run a patient survey around issues at the pharmacy
- Ask the group and pharmacies for comments
- Decide on a suitable course of action if necessary

### **Revisit actions 2012**

- Look back at the outstanding actions from 2012 and see if further progress can be made.

## Opening hours

At both sites the reception is open from 8.00 am to 7.00pm.

On Mondays, Wednesday and Thursday at Offerton and Tuesdays at Hillgate reception is open at 7.30am.

Telephones are answered from 8.00am to 6.00pm.

At 6.00pm the telephones are switched over to the out of hours service.

### GP Surgeries at Hillgate from April 2013

<b>Day of week</b>	<b>AM</b>	<b>PM</b>
Monday	8.30 – 10.40	3.30 – 7.00
Tuesday	7.30 – 11.10	1.30 – 6.00
Wednesday	8.30 – 10.40	3.00 – 6.00
Thursday	8.00 – 11.10	3.00 – 6.00
Friday	8.00 – 10.20	Duty doctor only
Saturday	8.30 – 10.30	
	Monthly	

### GP Surgeries at Offerton from April 2013

<b>Day of week</b>	<b>AM</b>	<b>PM</b>
Monday	7.30 – 11.10	4.00 – 7.00
Tuesday	8.30 – 11.10	4.00 – 7.00
Wednesday	8.30 – 10.40	Duty doctor only
Thursday	7.30 – 11.10	3.30 – 7.00
Friday	8.00 – 11.10	2.00 – 6.00

## Extended hours

From April 2013, the Practice will offer the following extended hours surgeries:

### Hillgate Surgery

Monday pm 6.30 – 7.00  
Tuesday am 7.30 – 8.00  
Saturday am monthly

### Offerton Surgery

Monday am 7.30 – 8.00  
Monday pm 6.30 – 7.30  
Tuesday pm 6.30 – 7.30  
Wednesday am 7.30 – 8.00 (alternate weeks)  
Thursday am 7.30 – 8.00  
Thursday pm 6.30 – 7.00

We expect that there will also be additional extended hours appointments from June 2013 when our new GP starts.

## Summary of evidence



### Local Patient Survey

We printed 150 surveys and handed them out to patients attending for both routine and urgent appointments over a week long period.

123 completed surveys were returned.

<b>Manor Medical Practice – Patient Survey</b>		
<p>We have recently asked our Patient Participation group for issues which they feel are a priority to them and should be discussed. There were two recurring issues which came up and we would now like to ask a wider patient group to give their opinions. We would be grateful if you would take a few minutes to complete this short survey for us and return to the reception desk before leaving today.</p> <p>The opinions of all our patients are important to us - if you are interested in joining the Patient Reference Group please ask at reception for an application form.</p> <p>Many Thanks.</p>		
<b>Appointments</b>		
Since the introduction of nurse triage have you ever been unable to get an urgent appointment when you needed one?	YES	NO
In your experience, how long do you usually have to wait to get a routine appointment?		
In your opinion how long is it acceptable to wait for a routine appointment?		
Are you willing to see any of our GPs in order to be seen in an earlier appointment?	YES	NO
Do you know that routine and urgent appointments are different	YES	NO
<b>Prescriptions</b>		
Have you ever had a problem collecting a prescription at the surgery?	YES	NO
Are you aware of the different types of items that may be on your prescription?	YES	NO
Do you know that the Practice requires a minimum of 2 working days (48 hours) to prepare a repeat prescription?	YES	NO
Do you know that a non regular item may take longer to be reissued as it requires prior approval from the GP?	YES	NO
Are you aware that in order to keep receiving some repeat prescriptions your GP will have to see you periodically for a medication review?	YES	NO
Do you read the messages on prescriptions?	YES	NO
Have you ever had a problem with a prescription at the pharmacy?	YES	NO
If yes, please comment on the problem:		

## Local Patient Survey Results

### Appointments

70% of respondents have been offered suitable appointments with the nurse triage system  
111 responses

84% of respondents have had to wait for more than 1 week for a routine appointment  
98 responses

78% of respondents think the wait for routine appointments should be no more than 5 days  
100 responses

83% of respondents are willing to see any GP in order to be seen quicker  
118 responses

85% of respondents know that routine and urgent appointments are different  
106 responses

### Prescriptions

88% of respondents have had no problem collecting prescriptions at the surgery  
119 responses

85% of respondents are aware of the different types of prescription items  
123 responses

92% of respondents know that a repeat prescription takes 48 hours  
121 responses

70% of respondents know that non regular items take longer than 48 hours  
123 responses

92% of respondents are aware of the need to have medication reviews  
120 responses

83% of respondents read the messages on their prescriptions  
123 responses