

# Patient Participation DES Year 1

**Knares Medical Practice**

Re-submission 26 February 2013

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# Knares Medical Practice

## Introduction

This report summarises the development and outcomes of the Knares Medical Practice patient reference group (PRG) year 1, in 2011/12 and is in line with the requirements of the Patient Participation Directed Enhanced Service.

### The report contains:

- Profile of practice population and PRG
- Process used to recruit to our PRG
- Priorities for the survey and how they were agreed
- Method and results of patient survey
- Resulting action plan and how it was agreed
- Progress made with the action plan
- Confirmation of our opening times

## Profile of practice population

### Practice list by age:

Age Range	Total	%
0 - 14	872	17%
15 - 44	2193	42%
45 - 64	1419	27%
65 - 74	405	8%
75 to 84	292	6%
85 and over	72	1%

### Practice list by gender:

Gender	Total	%
Male	2560	49%
Female	2693	51%

### Practice list by ethnicity:

Ethnic Group	Total	%
White British	2528	47.09%
Black British	4	0.1%
White Irish	12	0.2%
Mixed White & Black	14	0.3%
Mixed White & Black Caribbean	19	0.4%
Mixed White & Asian	12	0.2%
Indian	155	3%
Pakistani	34	0.6%
Bangladeshi	3	0.1%
Black African	97	2%
Black Caribbean	10	0.2%
Chinese	11	0.2%
Asian	101	2%
Other ethnic group	2253	43%
<b>Total Recorded in Notes</b>	<b>5253</b>	<b>100%</b>

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## Step 1: Develop a PRG

The Knares Medical Practice have worked hard to develop a patient group and have had a group since February 2011. We currently have 19 members on our group. The local community here at the Knares is an elderly and family one. Most people have lived on the estate for many years and this is portrayed in our patient group although we advertise widely. We have had interest from our website and these patients have joined us in our current meeting of 2012.

### PRG list by age:

Age Range	Total	%
15 - 44	2	11%
45 - 64	9	47%
65 - 74	4	21%
75 to 84	4	21%
85 and over	0	0%

### PRG list by gender:

Gender	Total	%
Male	8	42%
Female	11	58%

### PRG list by ethnicity:

Ethnic Group	Total	%
White British	18	95%
Indian	0	0%
Black African	1	5%
Asian	0	0%
Other ethnic group	0	0%
<b>Total</b>	<b>19</b>	<b>100%</b>

## Process used to recruit to our PRG

In recognition of the need to ensure this group was representative of the full practice list a recruitment drive was implemented in 2011/12 to attract new members and the decision was taken to build a virtual group in order to attract those who may not be able to attend meetings. We publish a monthly newsletter which is available in the practice and on the website which always includes information regarding our patient group and details on how to join. We had posters displayed within the surgery reception highlighting the meeting dates. A message was added to the website:

*“Dear Patient,*

*We would like to know how we can improve our service to you and how you perceive our surgery and staff. To help us with this, we are setting up a virtual patient representation group so that you can have your say. We will ask the members of this representative group some questions from time to time, such as what you think about our opening times or the quality of the care or service you received. We will contact you via email and keep our surveys succinct so it shouldn't take too much of your time.*

*We aim to gather around a hundred patients from as broad a spectrum as possible to get a truly representative sample. We need young people, workers, retirees, people with long-term conditions and people from non-British ethnic groups. If you are happy for us to contact you occasionally by email please click the link below to open the sign-up form and complete all the fields.”*

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## **Step 2: Agree areas of the priority with the PRG**

The Practice discussed the key issues of importance to patients with the Patient Group and it was agreed to focus on the following key issues:

1. Satisfaction with reception service
2. Opening hours
3. Getting an appointment
4. Telephone service
5. Quality of care from doctors and nurses

## **Step 3: Collate patient views through the use of a survey**

The Practice decided to use the GPAQ assessment as an on-going tool to measure patient satisfaction as this covered all of the key issues outlined in Step 2 above.

This survey was carried out continuously in January and February 2011.

We encouraged our patients to complete the survey by putting up posters in the surgery, posting information on the website, asking patients to complete the survey in the practice.

## **Step 4: Provide the PRG with an opportunity to discuss survey findings and reach agreement on changes to services**

The patient group regularly review the survey results at each meeting and agree any additional actions with the practice members who attend the patient group meetings.

### **Opening hours**

This is always a good discussion to bring up with our PPG to make sure we are still meeting the needs of our patients. According to our survey reports (which we hold in the surgery and give out to our patients regularly) we are meeting needs and our times are as follows including our extended hours:

- 08.00 – 06.45 – Monday to Friday
- 08.00 – 10.30 – Saturday

No daily closure for lunch.

Discussions will continue in every PRG meeting to determine if these times are accessible to all.

## **Step 5: Agree action plan with the PRG and seek PRG agreement to implementing changes**

See next page.

<b>PRACTICE NAME</b>	<b>Knares Medical Practice</b>
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<b>ISSUE TO BE ADDRESSED</b>	<b>IMPROVEMENT GOAL</b>	<b>KEY ACTIONS REQUIRED</b>	<b>BY WHOM?</b>	<b>BY WHEN?</b>	<b>REVIEW DATE</b>
<i>Which specific area are you going to focus on?</i>	<i>What do you want to achieve?</i>	<i>What needs to be done to achieve the goal? There may be more than one action</i>	<i>Who is responsible for ensuring it happens?</i>	<i>When do you think this will be completed?</i>	<i>When will you check on progress?</i>
<b>DNA's Did not attend appointment</b>	Reduce the number of DNA's to below 5 per day	The survey findings show support for striking repeat offenders off our practice list. However it has been decided to send letters to remind patients of the need to cancel any unwanted appointments and review DNA rates daily.	Practice Manager	March 2011	March 2012
<b>Prescribing</b>	Review of the patient medication usage	Comments in the survey suggested a need to review patient medication usage more frequently. The patient group were asked about this and thought this was a good idea. The practice agreed to monitor this and place as a priority action.	Practice Manager	March 2011	March 2012
<b>Parking</b>	Contact local council to see if we can get another disabled parking area	Parking was raised as an issue in the patient survey. We have parking at the surgery and have one disabled area. Our main road is free to be used and has ample parking together with a community shopping area right next door to the surgery, which is also available for parking together with disabled areas. It seems	Practice Manager	March 2011	March 2012

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ISSUE TO BE ADDRESSED	IMPROVEMENT GOAL	KEY ACTIONS REQUIRED	BY WHOM?	BY WHEN?	REVIEW DATE
Parking contin.		this is still insufficient to our patients. We are looking into having another disabled area added but this would depend on the local council being approached as doctors parking would be needed in the main road.			
<b>Pharmacy</b>	Inform patients about the decision not to open a pharmacy in the Practice	Some comments suggested a pharmacy within the practice would be helpful. The group discussed this and decided not to proceed with this. A Co-op pharmacy is situated right next to the surgery in the community shopping area where patients can immediately take their prescriptions for dispensing after their appointment. This is approximately a 2 minute walk from our door	Practice Manager	March 2011	March 2012
<b>Doctor appointment times</b>	<p>Inform patients about opportunity to book longer appointment times</p> <p>See how many patients request longer appointment times</p>	The survey results showed some patients were concerned about the time they have to speak with their doctor. This was discussed at our recent PPG meeting that sometimes 10 minute appointments are not long enough. It was concluded that when patients book an appointment to make it clear to the receptionist if they have one or more problems to speak to the doctor about. We are able to give a double appointment time if we feel this is needed.	Practice Manager	March 2011	March 2012

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## **Step 6: Publicise actions taken and subsequent achievement**

The initial report was posted on the Practice website in line with the previous deadline of March 2012. This additional information has now been added to the website