

# Patient Participation Group Phase 1 Report

The Argyle surgery hoped to be able to invite as many patients as possible to join our Patient Participation Group (PPG). We wanted to be sure that a wide variety of patients could be represented and had the option to join the Group. This document outlines the methodology of the groups creation, the initial make up of that group compared to our patient population and the groups initial prioritisation of areas to focus on. We have also included all the comments from the consultation exercise and some of our responses to the main themes.

## **Methodology**

We initially emailed our summer newsletter to all patients who we had permission to email (approximately 1000 patients) This mail out included an explanation about the PPG, along with an invite to join and by asking patients to identify and prioritise possible issues at the Surgery through and online collection tool.

Our summer newsletter was also made available throughout the surgery encouraging those to join the PPG and explaining its purpose. For approximately 4 weeks all patients with an appointment or who came through the door (eg picking up a prescription) were given a copy of the same questionnaire and asked to complete and return it to reception. (A copy of the newsletter and the initial prioritisation exercise are in appendix 1). The clinical staff also informed and encouraged patients to join the PPG if it was felt to be appropriate to discuss.

Our aim was to cultivate a large virtual group made up of a diverse cross section of our patients which we could communicate with by email. This would make it simpler for patients to be involved without having to organise the time to attend meetings, which would be very difficult with such a sizeable group. To enable this we have asked all those who were interested in joining the PPG to provide us with an email address. We Did not want to exclude patients for whom online access would be a barrier to their participation so if electronic contact was not preferable for them we asked them to specify how they might like to be contacted should this not be an option for them.

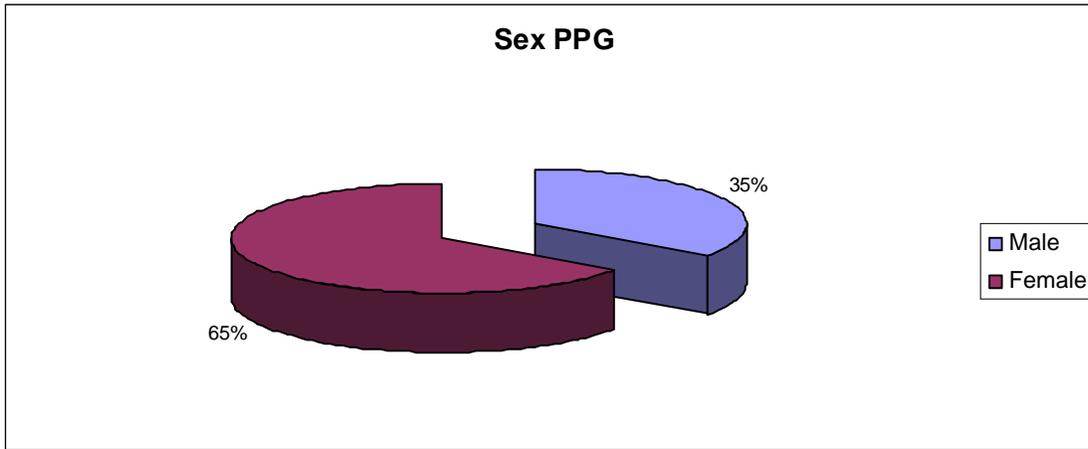
To date we have enlisted a Patient Participation Group of 147 members. We felt that by accessing patients both over email and those who used the surgery directly on a day to day basis over a period of time we would be able to canvas the many different factions that make up our patient base.

Although a large number of patients chose not to join the group they did complete the questionnaire for us and this report will discuss the outcomes of this and the next steps we intend to take with the input of our PPG.

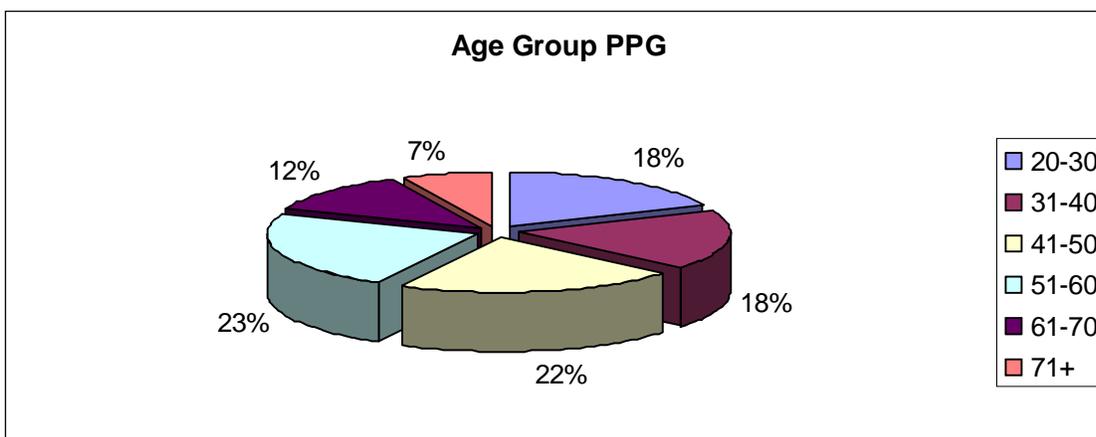
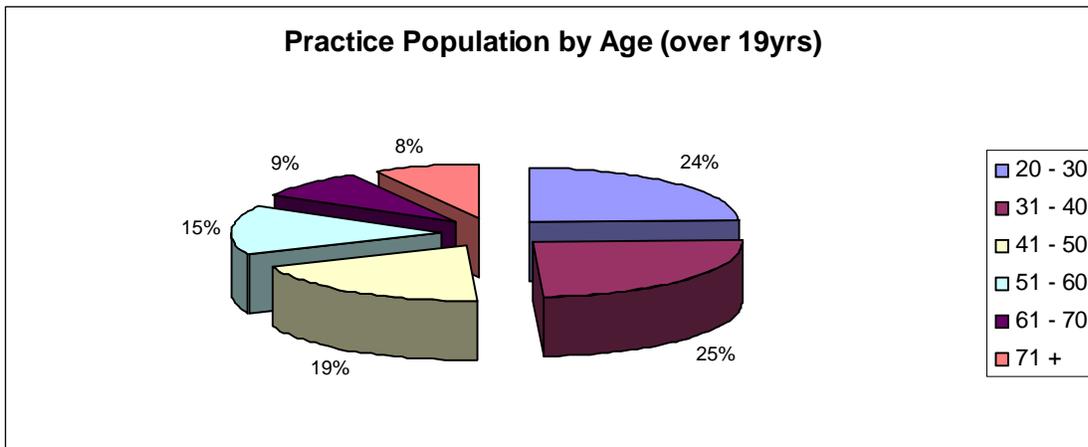
## **The make up of the Patient Participation Group**

We wanted to try and encourage a broad spectrum of patients to join the PPG so as to represent the practices population as fairly as possible. In order to assess the diversity of our group we decided to break it down by age, ethnicity and sex and compare this to the demographic of the surgery as a whole.

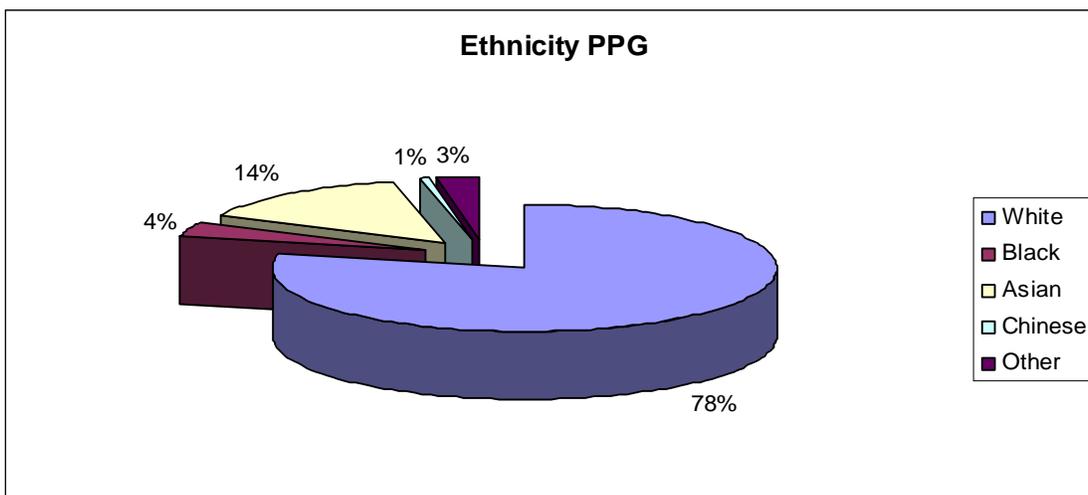
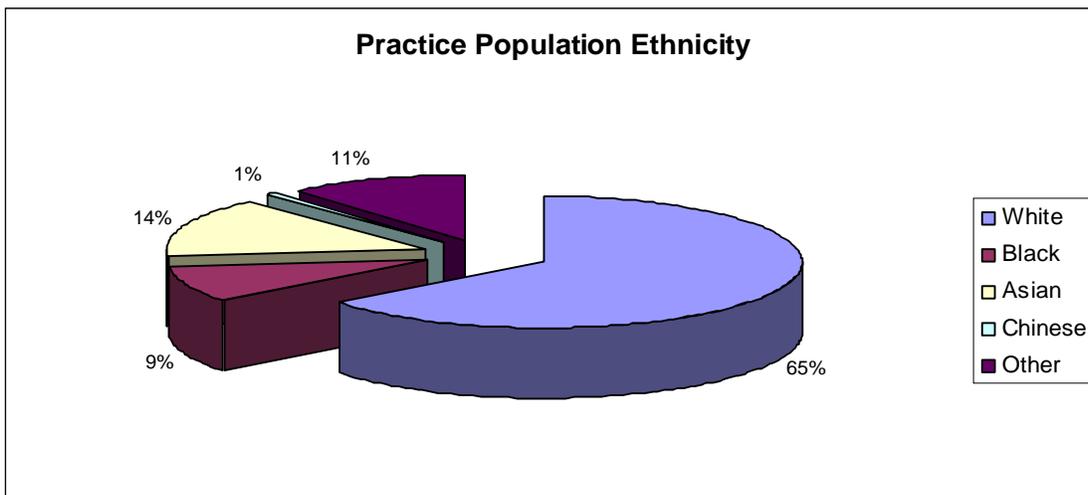




As you can see from the above pie charts that although the PPG echoes the surgery by being made up of a greater number of women than men the PPG is a little under represented and we would like to encourage some more men to join.



The above charts show that half of the age groups are very well represented very nearly matching the percentages of our physical population. However it does show that the 20-30 year olds and 31-40 year old are a little under represented as well as 51-60 year olds having a larger proportion of the PPG than make up the practice population.



The breakdown of the Surgery by ethnicity is a very difficult task as it relies upon subjective categories by self selected groups. In order to generate a comparable view of the ethnicities of both the surgery as a whole and the PPG we have had to combine a number of nationalities into larger distinctions. By doing this we have been able to produce a picture that we can contrast however it cannot be a totally accurate portrayal.

The above graphs do show that our PPG is not dissimilar to the practice demographic as the proportions are representative. However it does show that the PPG has a smaller percentage of black patients enlisted and that the other category, which was made up of a huge variety of minority ethnicities, is under represented.

### Practice commentary

We feel we have created a representative group of our patients and would like to improve upon this to try and make sure everyone is properly represented. We would like to continue to grow the group and consult them on decisions about the practice.

### Priority setting

The PPG were asked for their feedback and prioritisation of 6 key areas relating to the practice

These were:

- Clinical Care
- Appointments

- Reception Issues
- Opening Times
- Parking
- Online Services

We asked patients to rank these in order of importance with 1 being the most important and 6 the least. We also invited them to identify any other areas pertaining to the surgery and their health care. Over 4 weeks we handed out 400 printed requests and collated the results.

We applied the system of 'first past the post' to interpret the numbers which meant that the issue which was prioritised as 1 the most is classed as the most important. Followed by the next issue to have the most priority 1 being the second most important and so on for all issues. We felt this way of reading the results showed a fairer representation of what was classed as most important to our patients.

The outcome of this was that Clinical Care was shown to be the most important issue followed by Appointment availability, Online Services, opening times, reception issue and finally parking.

In order to try and gain as much as possible we felt the top three could reasonable be addressed in the form of a full survey of the group and this will be sent out to the PPG for consultation with this report in December 2011.

## ***PPG Comments***

The responses we collated from the initial consultation had several themes which we felt we could address very quickly. We would like to take this opportunity to respond to them here.

### **Comments concerning Clinical Care**

I think it might be useful to ask patients about how they feel during appointments

- We strongly agree with this opinion as people's feelings can heavily influence their healthcare and outcomes. All healthcare professionals at the Surgery are trained in consultation skills which we encourage to be patient centred and strive for excellence. We would hope that patients should always feel comfortable and able to discuss whatever is concerning them.

Choice of doctor

I know Dr G Dhillon is now not available as she is taking more time off. I would like to have a named doctor who would know me and my details, especially regarding what treatment I would like (or not) if I am seriously ill

- We try very hard to ensure continuity of care for all our patients and should you wish to see a particular doctor we will respect this request and offer you the first available appointment with that clinician. However this may not always be at a convenient time for you and so we will also make you aware of what might be available with someone else. Dr Gouri Dhillon has not been as available as she once was and so we do regret if you have been unable to see her, however should you wish to build a relationship with an alternative doctor at the Surgery they will be able to take care of you with the advice and guidance of Dr Dhillon.

Flexibility on referral - let patient choose from appointments available nationwide or all of London.

- Like other GP surgeries in Ealing we use the Ealing Clinical Assessment Service (CAS) for all our referrals. If you would like more information we have leaflets in the Surgery and details on our website. CAS uses Choose and Book which is a service that allows patients to choose their appointments at a Hospital of their choice within the NHS.

Patient choice is important at The Argyle Surgery as it is in the whole NHS. From our experience most patients like to be seen quickly by a local specialist. However it is possible to make some referrals further away when appropriate. Please discuss this with your doctor at the time of deciding to refer.

## **Comments concerning appointments**

Love the new phone appointment system. Would like the option to have blood tests after 4pm. I have one monthly at Ealing Hospital which is expensive and time consuming

- We provide blood tests on Thursday mornings as a large proportion of tests require a period of fasting which is most convenient overnight. This is an additional service to our patients. Ealing Hospitals phlebotomy clinics are at Monday to Thursday 8:45am to 4:30pm and 8:45am to 4:00pm on a Friday. We are investigating the possibility of expanding our services depending on staff and space.

I am glad you are not using the "you are 'X' in the queue" anymore. I found calling back later a better option as waiting to move up the queue when trying to book a slot when the surgery opened at 8am a very time consuming exercise.

Calling the surgery has been an issue for many years - you should have a system that advises when all receptionists (who are not dealing with patients at the desk) are on the phone

The phone queuing system seems to have stopped. It is very frustrating trying to get an appointment and having the phone either ring unanswered or be told that the call volume is high and to call back later. I suggest devising a rota of reception staff to be on dedicated "phone answering duty" rather than sharing it between everyone.

Getting an appointment really has to be a priority and the attitude that we are being a nuisance when requesting one.

- We have changed our telephone system to improve access to the Surgery. This includes an automated system which enables you to check, cancel and book appointments as well as a controlled queue to speak to a receptionist. This is explained on our website and in our summer newsletter when we launched the service. The addition of the automated system has meant that you are now much less likely to be faced with a engaged/busy tone or be told to call back later. Our reception team do split their time between solely answering the phone and assisting patients face to face, however I am sure you can understand that this is not always as easy to do as it sounds. We do appreciate your understanding of the difficulties our receptionists face. We answer on average 1800 phone calls in a typical week during winter and although nearly 500 of those are being handled by the automated system it is still a heavy workload along with handling over 1000 appointments a week, as well as face to face queries, prescription requests/ pickups and a multitude of other duties. It is a difficult job and they work very hard to help everybody. We appreciate your patience and support as we try to develop and aid our reception team to assist our patients.

Automated telephone system great for next few days appointments. not so great for booking a few weeks in advance. Can the system be set up to skip days rather than go through appointment by appointment?

- The automated telephone system is not ideal for booking appointments in advance as at the moment there is no function to be able to choose a date. We have raised this with our supplier as a possible development. However we do have an online booking service that will allow you to do this very easily. This is also available 24hrs a day and we have information about it on our website. Should you be interested in registering for this service, please speak to reception who will be able to advise you.

I like the idea of also having an appointment by telephone service for those instances when a quick chat with a nurse or GP is all that is needed and a physical meeting is not required. In many cases that would be more efficient for both the GP/Nurse and the patient. I'm not sure how well this service is publicised/utilised.

- Thank you for the suggestion of promoting telephone appointments. We will include information about these in our winter newsletter.

### **Comments concerning opening times**

I work away from home and cannot get to see a doctor as there is no Saturday surgery. If there was a Friday evening or Saturday am surgery it would save me having to take a day out a currently a 230 mile round trip.

- We have been running a Saturday Morning Surgery for over 2 years now. We are open from 8:15am to 12pm every Saturday this is a pre-booked clinic only and appointments must be booked in advance.

### **Comments concerning Online Appointment booking**

I am very pleased with your recent advances with the online appointment system; I appreciated that extending the service must have required a lot of thought.

- We appreciate your positive feedback for this service and are keen to expand this avenue to allow you more access and control of your care. We are working hard with our system supplier and are proud to be the first practice offering online prescriptions and hope to add a personal health diary and test results system some time next year.

### **Comments concerning Parking**

Didn't realise that you had to pay for parking near the Surgery. It is a bit of an inconvenience.

- The Council have introduced a Controlled Parking zone between 9am and 10am and 3pm and 4pm on St Stephens Road. It is still free to park outside of these times and there are no restrictions on Argyle Road and surrounding roads. We advise our patients to park safely and check any signs for restrictions. We would also advise caution when crossing Argyle Road and to use the crossing islands as it can be very busy at peak times.

### **Comments concerning Other issues**

To me it is not clear what you intend to mean by 'consult our patients'

- We are attempting to solicit feedback from our patients to inform the way we deliver our services and consult them on our plans.

I generally find waiting time in the clinic to be very long. I have waited up to an hour before. However the doctors are fantastic.

- Our routine appointments are ten minutes long and I'm sure you appreciate that not everything can always be covered in ten minutes. We do encourage patients to only bring one problem at a time but this is not always a reasonable request. We run a safe service and this can mean that appointments do run over. We do appreciate your patience in these matters.

### **Remaining Comments**

On the whole I am really happy with the surgery!

I am very happy with the doctors at the surgery

I am almost always very impressed with the standard of care and of service that you offer.

Much appreciated!

I think you are all fantastic - thank you for your care

I am very happy with everything

The Surgery offers an excellent patient-centred service at all times. Well done to everybody!!

We can find no reason to complain in any way

I'm very happy for the services they give us they are the best

I've always had great service from The Argyle Surgery

I have been impressed with the very high quality of services provided by the Surgery

Excellent

I have been your patient for over 35 years

For so many years I think this is an excellent practice/surgery and have always found the doctors nurses and reception staff to be extremely helpful and friendly. Many people complain about the reception staff at other surgeries - not this one. They couldn't be nicer.

I am very happy with the service

- Thank you so much for your support we are really trying to keep the services up in what is becoming an increasingly difficult environment.

After analysing the findings of our first consultation we are now intending to create a fuller survey focussed around the top 3 areas identified. This is with the aim of inviting further comment from our now formed Patient Participation Group before making it available to all of our patients.

# Appendix

*The*  
**Argyle Surgery**



**NHS**  
**Ealing**

## The Argyle Surgery Patient Newsletter Summer 2011

Welcome to our summer newsletter. It has been a busy few months at the surgery and we are keen to keep our patients up to date and involved with the services we provide.

You will have noticed some building work at the surgery. This has been to provide a new consulting room downstairs. We apologise for any inconvenience and aim to be delivering services from the new room by August.

### Staff changes

The Team at The Argyle Surgery is always striving to help and we have a few new additions. We are delighted that Beth Moyse has joined our reception team. Mina Patil has joined us as a Health Care Assistant and Cornelia Harte is a welcomed new Practice Nurse. Sarla Shah has sadly left our reception team and is greatly missed.

### Travel Vaccinations

As summer arrives you may be thinking of holidays to exotic places so please remember to check if you need any vaccinations before you travel.

NHS Choices (<http://www.nhs.uk>) has lots of advice as well as <http://www.fitfortravel.scot.nhs.uk> which will tell you what you may need depending on where you are travelling. We run a Travel Health clinic once a month. Appointments can be booked by contacting reception.

It is essential that you complete our short questionnaire before booking an appointment. This allows us to ensure we have your required immunisations in stock. Travel health questionnaires are available for download on our website at [www.argylesurgery.com](http://www.argylesurgery.com) or at reception.

We are a designated Yellow Fever centre and our nurses are fully trained in all aspects of travel health advice. Please make an appointment to see one of the nurses at least 6 weeks before you travel - this is important as vaccination against some diseases requires a course of injections and can take up to 2 weeks to give you full protection once you have finished the course. Each member of your family will require separate appointments.

Travelling abroad always has some risks to your health but by ensuring you have the correct vaccinations and you take certain precautions you can minimise your exposure to most major health hazards.

Travel advice leaflets are available at the surgery or can be downloaded from our website. Not all immunisations are free on the NHS and so a list of prices is also on our website under Services | Travel Health.

### Measles, Mumps and Rubella immunisation (MMR)

Ninety per cent of two-year-old children in the UK have received their first dose of the MMR vaccine - the highest level for 13 years, says the Health Protection Agency.

But this is still short of the 95% uptake rate which would stop the spread of the disease in the community. The first MMR vaccination is given to children at around 13 months of age, when the immunity the baby got from its mother fades. Children are given a booster dose before they start school (usually between three and five years of age).

Between 5 and 10% of children are not fully immune after the first dose. The booster gives increased protection, and less than 1% of children remain at risk after it. We have a special clinic for childhood immunisations that runs every Thursday afternoon from 2.30pm.

### Surgery Pod

We have an exciting new addition to the Surgery in the shape of our Surgery Pod. This is a computer which is currently found at the bottom of the stairs and can help you in a large number of ways. The Pod can help you with taking your blood pressure, measuring your height and weight as well as guiding you through some of our health checks needed to register.

If you are permanently registered with us please touch the screen to choose a language and follow the prompts to enter your name. **Please enter your full name that you are registered under and your full date of birth.**

If you are doing a New Patient check you will need a code from reception.

There are a number of other options which you may like to look at.

All the details that you input will be submitted directly into your medical record. If you encounter any problems please ask reception for assistance.



## ***The Argyle Surgery Patient Participation Group***

We are currently recruiting patients for our patient participation group. This group of patients will help us to improve the service at the Surgery. If you wish to join our patient participation group, please fill in this form and return it to the reception desk and we will get in touch with you by email to complete our survey. If you have completed this online, you do not need to fill this in again.

Thanks in advance for your help

What is your email address? (Please print)

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Are you Male or Female? 

<b>Male</b>		<b>Female</b>	
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What is your age in years? \_\_\_\_\_

What is your ethnic background?

<i>White British</i>	<input type="checkbox"/>	<i>Mixed</i>	<input type="checkbox"/>	<i>Black - Caribbean</i>	<input type="checkbox"/>
<i>White Irish</i>	<input type="checkbox"/>	<i>Asian - Indian</i>	<input type="checkbox"/>	<i>Black - African</i>	<input type="checkbox"/>
<i>White Other</i>	<input type="checkbox"/>	<i>Asian - Pakistani</i>	<input type="checkbox"/>	<i>Black - Other</i>	<input type="checkbox"/>
<i>White and Black Caribbean</i>	<input type="checkbox"/>	<i>Asian - Bangladeshi</i>	<input type="checkbox"/>	<i>Chinese</i>	<input type="checkbox"/>
<i>White and Black African</i>	<input type="checkbox"/>	<i>Asian - Other</i>	<input type="checkbox"/>	<i>I'd prefer not to say</i>	<input type="checkbox"/>
<i>White and Asian</i>	<input type="checkbox"/>	<i>Other</i>	<input type="checkbox"/>		<input type="checkbox"/>

What do you think are the most important issues on which we should consult our patients?

Please rate each item on a scale of 1 to 5 where 1 is very important and 5 is not very important (you should select only 1 number for each area).

	Very Important			Not Very Important	
	1	2	3	4	5
Clinical Care					
Getting an Appointment					
Reception Issues					
Opening Times					
Parking					
Online Access					

Do you have any other comments or concerns?

