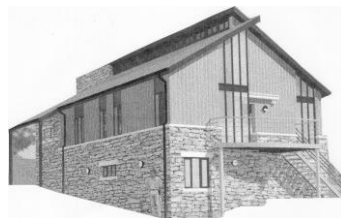


Dr. J.J. Neylon
Dr. S.F. Hodnett
Dr. M Reinecke
Dr J P Allingham
Dr R Fitch



ST JAMES' SURGERY

Harold Street
Dover
Kent
CT16 1SF

Practice Manager
Mr C.J. Mackenny

Lead Nurse
Mrs K. Cannell

Tel: 01304 225559
Fax: 01304 229322

Local Patient Participation Group 2012/13 Report

Introduction

In April 2011 the Department of Health published the details of a Directly Enhanced Service for Patient Participation. The purpose of the document was to ensure that patients were involved in decisions about the range and quality of services provided by their GP Practice. The way this proactive engagement of patients was to be facilitated was by the formation of a Patient Participation Group (PPG) made up of patients registered at the Practice.

In August 2011 a meeting was held in the Dover Town Hall for patients to register an interest in joining the St James' Surgery PPG. Advertisements were placed in the local papers and the Primary Care Trust sent details of the meeting via email to an extensive list of educational, voluntary, and health orientated organisations requesting representatives be sent. Posters and leaflets were handed out in the Surgery. Unfortunately the event was poorly attended with not sufficient patients putting their names forward to be able to set up a Group.

As a result a further meeting was arranged in September, again with extensive advertising as previously. Fortunately this time ten patients from the Surgery indicated a wish to set up a PPG.

The current PPG is almost exclusively made up of retired individuals, with a fairly equal split in terms of gender. The PPG is keen to encourage patients to join who could represent different groups such as younger patients, with disabilities or from ethnic backgrounds. Despite extensive canvassing the PPG has been unable to attract anyone from these areas. During 2012 by further advertising in the surgery waiting room, the practice booklet and patient newsletters two new members have joined. The Group will continue to try to attract members who can represent all categories of patients, however common with the vast majority of surgeries this is proving difficult.

2012/13

In its second year the PPG needed to consolidate on the work undertaken in 2011/12, ensure the agreed action plan resulting from the 2011/12 patient survey is implemented and consider which priorities Surgery patients would feel were ones that should be included in a new local patient survey.

Action Plan from 2011/12

The table below shows the results from the 2011/12 action plan:-

Ref	Action Point	Action to be Taken	Action Taken
1	Patients would like appointments outside of normal opening hours to be able to see their GP and pick up prescriptions.	Practice to sign up to the Extended Hours enhanced service. One evening with 3 GPs and two early mornings with 1 GP to be provided	Extended hours started from 1 st April 2012. The Practice now provides an extra 4 hours of clinic time and opens at 7:30am on Tuesday and Thursday and until 7:30pm on a Wednesday. [*** see below]
2	Answer the telephone more quickly	Increase reception staff. 3 receptionists to cover desk and telephones at peak times.	Staffing has been increased but will need to see result of 2012/13 patient survey to check satisfaction.
3	Have a member of staff sitting at the reception counter.	Increase reception staff. 3 receptionists to cover desk and telephones at peak times.	The reception desk is covered by a member of staff at all times the Practice is open to patients. This started from January 2013.
4	Create a more welcoming environment within reception	All staff to attend a Telephone and Customer Care Course. Staff to have a uniform and name badges.	Staff now wear a uniform and have name badges. Training on 'customer care' continues.
5	Patients do not like giving clinical information to receptionists	GPs to review the necessity of this information	Clinical information is no longer requested for GP urgent need appointments. The time allowed for nurse appointments depends on what needs to be done so the patient still needs to give a general indication for these.
6	Patients do not want to have to phone back for a duty doctor appointment when surgeries are full.	GPs to consider alternative appointment structure to avoid patients being 'handed off' to a later time	The system for urgent medical need requests has been changed to be more flexible so patients are no longer asked to phone back.
7	Offer appointments with a lady GP	GPs to investigate becoming a Training Practice.	A female GP working 4 half days per week joined the Practice in December 2012
8	Increase awareness of disabled access at Harold Street level	New signposting for disabled access.	New signs have been installed.

*** Full Details of Opening Hours

Monday	08:00 to 18:00	
Tuesday	07:30 to 18:00	[Dr Neylon from 07:30 to 08:00]
Wednesday	08:00 to 19:30	[Drs Hodnett, Reinecke and Allingham from 18:30 to 19:30]
Thursday	07:30 to 18:00	[Dr Neylon from 07:30 to 08:00]
Friday	08:00 to 18:00	

Due to covering GP annual leave the early and late opening days and times can vary, but will always offer at least 4 hours of surgeries outside of 08:00 to 18:00.

The Practice can be contacted during the core hours of 08:00 to 18:30 by telephone on 01304 225559. Outside of core hours please phone 111. Repeat medication can be requested via the Practice website on www.st-james-surgery.co.uk

2012/13 Priorities, Patient Questionnaire and Action Plan

As the PPG was now well established they felt that this year it would not be necessary to survey patients on priority areas and decided to concentrate on three main issues. These were the patient's experiences of booking urgent medical needs appointments; why patients DNA appointments and what could be done to prevent it; and finally why did patients attend Buckland Hospital MIU rather than coming to see the GP. A questionnaire was designed and approved by the PPG.

In order to get as wide as possible collection of data the questionnaire was made available in the waiting room of the Surgery and on the Practice website. On the website the questionnaire could be accessed as a free standing option, or was automatically prompted at the end of any on-line request for medication.

The survey went live on 14th December 2012 and ceased on 28th January 2013. This gave a sample of 167 responses. The statistical results of the survey and each individual free text comment were then reviewed at a PPG meeting and the following action plan agreed with the Practice.

Ref	Action Point	Action to be Taken	Responsible	By When
1	Answer the telephone more quickly	Train additional staff to answer the phone at peak times and when receptionists are absent from their desk.	Practice Manager	30 th April 2013
2	Comments still exist that a negative impression is given by some of the receptionist team	Continue to impress the need for an approachable, flexible and efficient service	Practice Manager	On going
3	Reduce the length of time patients wait after their appointment time	Produce data to establish where the problem is and then discuss at a Partner's meeting	Practice Manager	31 st May 2013
4	Reduce DNA level by reminding patients of their appointments	To consider the introduction of a text messaging service to remind patients of appointments.	Practice Manager	30 th June 2013
5	Increase the awareness of patients on the correct use of MIUs and A&E units	Create posters to explain how Buckland MIU should be used as part of a media campaign in the waiting room	Practice Manager	30 th April 2013

The Practice has confirmed to the PPG the following:-

- Anyone can apply to join its patient list, even if they are registered elsewhere in Dover. The Practice has what is termed an 'Open List'.
- Patients requiring an urgent appointment will be seen with 24 hours and wherever possible on the same day as the request.
- Patients may see any of the Doctors; a patient is registered with the Practice not a specific GP. However there is some limitation as only one Doctor each day runs the Urgent clinic and if you require an urgent appointment only that GP is available.
- The Practice offers a wide range of clinical services via the Treatment Room and some health professionals hold sessions in the building.
- The Practice will always endeavour to enable care to be delivered as close to home as possible subject to clinical considerations.

CJM/06.03.13