

BELGRAVE SURGERY PATIENT PARTICIPATION GROUP REPORT 2013

The following report covers details of the Belgrave Surgery Patient Participation Group and the Patient Survey carried out in December 2012 and January 2013.

1. Practice population profile:

Total patient list size, 4378 at 15th March 2013.

The age and gender make up of the patient list is currently as follows:

Age Range	Male	Female	Total
Capitation Report – Totals (Age/Gender)			
0 - 18	436	427	863
19 - 30	461	532	993
31 - 45	366	334	700
46 - 60	444	394	838
61 - 75	311	301	612
76 - 90	127	207	334
91+	8	30	38
Total	2153	2225	4378

Ethnicity is not recorded for every patient. Where it is recorded, the breakdown is as follows:

Ethnicity	Patient Count
Report Results: Patient Ethnicity (where recorded)	
(XaJQv) British or mixed British - ethnic category 2001 census	2094
(XaJQw) Irish - ethnic category 2001 census	12
(XaJQx) Other White background - ethnic category 2001 census	121
(XaJQy) White and Black Caribbean - ethnic category 2001 census	8
(XaJQz) White and Black African - ethnic category 2001 census	7
(XaJR0) White and Asian - ethnic category 2001 census	14
(XaJR1) Other Mixed background - ethnic category 2001 census	11
(XaJR2) Indian or British Indian - ethnic category 2001 census	35
(XaJR3) Pakistani or British Pakistani - ethnic category 2001 census	21
(XaJR4) Bangladeshi or British Bangladeshi - ethn categ 2001 census	3
(XaJR5) Other Asian background - ethnic category 2001 census	21
(XaJR6) Caribbean - ethnic category 2001 census	3
(XaJR7) African - ethnic category 2001 census	29
(XaJR8) Other Black background - ethnic category 2001 census	1
(XaJR9) Chinese - ethnic category 2001 census	41
(XaJRA) Other - ethnic category 2001 census	10
(XaJRB) Ethnic category not stated - 2001 census	34
(XaJSE) Polish - ethnic category 2001 census	15

2. Profile of the Belgrave Surgery Patient Group:

Age range of Patient Group: 46-60 = 4 61-75 = 9	Sex: Male = 6	Ethnicity: Where known = (XaJQv) British or mixed British
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76-90 = 1	Female = 8	- ethnic category 2001 census
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Clearly the patient group is still not entirely representative in terms of gender, age or ethnicity. It is made up of people however who have particular experience to contribute and who have the time and interest.

Recruitment for a Patient Group has up until last year been tried with almost no success. Last year patients were invited to express interest in the group when completing their patient survey. This resulted in a couple of new members.

For the purposes of the latest recruitment exercise over the last year notices have again been put on the Jayex patient calling board, in newsletters and on the website as well as notices encouraging feedback in the practice. We have also in the past tried to encourage a virtual patient group with almost no response

We continue to try and address this issue, in the next year the group has suggested another reinforcement of the message that feedback is welcomed and that further efforts be made to obtain surveys from those not attending the practice in person.

3. Setting Priorities and Drawing Up Questions for the Patient Survey:

The survey was discussed at the meeting on 13th September 2012 when it was suggested that something be added about appointments. Questions 4, 5, 6 and 8 were related to getting appointments.

A copy of the 'GPAQ' questionnaire previously used at the practice in the full version to obtain feedback was circulated for comment in time for the patient group meeting of 12th November 2012. This was to start discussion and stimulate ideas.

Comments were as follows at the meeting of 12th November which then fed into producing the questionnaire:

- that there were too many boxes to tick, poor/good/excellent should be sufficient to gauge response (Actioned, the number of boxes was cut)
- that some questions should be about the Practice Nurse team as they were very important to many patients (Actioned, question 10)
- likewise about receptionists (Actioned, question 2)
- access to appointments was very important (Actioned, questions 4, 5, 6 and 8)
- some discussion took place about how to include a patient's 'usual doctor' (Actioned, questions 4 and 9)
- it was suggested that the closing comment should be something similar to 'tell us if you are not happy, tell others if you are happy' (Actioned, see bottom of questionnaire)

The questionnaire was drawn up and handed to 150 patients during December and January with 114 returned. The results are summarized in a Powerpoint presentation.

4. Action Plan

The results were discussed at the meeting of 11th March 2013.

There was agreement that the results were good and that there were no particular concerns. There were no points of disagreement about the survey. The Practice Manager suggested that an additional phone line would be added to enable

more phone answering capacity early in the morning in response to a couple of the survey comments. It was agreed that this was a helpful action. The Practice Manager also explained that an additional reception team member had recently been taken on. This will help management of reception particularly in view of the recent addition of patients to the list.

Further feedback from the group included the suggestion that to get wider feedback a comment/complaint form should be available. The Practice Manager explained this already was available and in spite of messages on the calling board and signs there was rarely any comments. However it was agreed that the Practice Manager should start a publicity campaign to promote this option. None of the action points had any impact on contractual obligations.

This report will be posted on the website and posted to the members of the patient group by 31st March 2013. Copies will be available on request and will be placed on display on a notice board within the surgery.

5. Opening Times

The opening times of the surgery are given on the website. Our opening times are:

08.00 to 18.30 each day with a variety of appointment times in the morning and afternoon. Further detail can be gained through our reception team.

We run evening surgeries each week either on a Tuesday or Wednesday and sometimes on other days if demand indicates this is required.