

# *The Harvey Practice*



## Patient Reference Group Report 2012 / 2013

The Practice population profile is mainly elderly mixed with younger families. There are a proportion of carers in the practice. There is a small degree of ethnicity and there are infants, school aged children, teenagers, workers those not in employment and the retired. The practice deals with very few drug users. The practice does not have many university students on their records as generally when students attend university they register with their university GP. We do have some patients with learning difficulties. We have attempted to be inclusive in engaging with our practice population for the purposes of the Patient Reference Group and this has continued during 2012/13. During the current year we have attached a joining form to our new registration forms in order that each new patient registering is informed and has the opportunity of joining if they so desire. We have also included the form in our Practice brochure and there is a notice in the waiting area of the two sites at Merley and Broadstone inviting patients to join. This has resulted in 33 patients being added to the group, which now totals 114.

Whilst during 2011/12 we set our age, sex and ethnicity profile and our receptionists were asked to identify patients who fulfilled the profile, this year we have not been specific in identifying patients but have added to our virtual group through the methods identified above.

The Patient Reference Group Committee has increased by one member, Ms. Glenda Cardy, and the other members are the same as the previous year.

The process for this year was to contact the virtual patient reference group with an email asking them for their priorities with regard to the surgery. An email was sent to the virtual group asking for their priorities for the current year and from the 90+ emails sent only 5 responses were received. Because of the low response the Practice took advice from Louise Bates of Links the Local Involvement Network which gives patients an opportunity to influence health and social care services in Dorset. She attended the Practice on the 27th November, 2012 to offer advice as to how to phrase any future correspondence and questionnaires to patients. She also gave good advice as to how to encourage greater uptake with regard to priorities and also responses to questionnaires sent.

Louise Bates helped the management identify from the small number of responses received, the priorities which were around confidentiality at the reception desk, repeat prescriptions and on-line appointments. A questionnaire was designed around these priorities and this was sent to the patient reference group. 8 responses from the virtual group were received and as this was not considered to

be representative a further 200 patients were canvassed in the surgery with the questionnaire. However, only 155 were received back from this source, making a total of 163 response overall. (See figures below). It should also be noted that of the 163, some patients did not answer all questions.

At each step in the process the committee was asked for its opinion and so it was with the committee's knowledge and approval that the questionnaire was used.

The analysis of responses was carried out with the results being sent to the senior partner, Dr. Lionel Cartwright and all committee members for review. The results are shown below.

Patient Questionnaire		
	<b>Confidentiality at the reception desk</b>	<b>YES</b>
Q1	Do you consider that confidentiality at the reception desk is sufficient?	127
Q2	Have you noticed that we have a notice at reception asking you to give the patient in front a little space for privacy whilst they are at the desk?	126
Q3	Have you noticed that at the reception desk there is a notice indicating that if you require to talk to the receptionist in private you should request this and you will be taken to a private room?	89
Q4	Our receptionists are trained to take telephone calls in such a way that patients in the waiting room cannot identify who is on the other end of the telephone. In your experience, do you agree with this?	149
Q5	When waiting to be attended to at the desk, have you overheard a patient's conversation with the receptionist?	84
	<b>Repeat Prescriptions</b>	<b>YES</b>
Q6	Do you use our repeat prescription service?	107
Q7	Do you order your prescriptions on-line?	4
Q8	If not, would you find this helpful?	76
Q9	Our turnaround time for repeat prescriptions is 48 hours (2 working	13

days).

**Excluding the turnaround time** mentioned above is there any other way in which we can improve this service for you?

	<b>On line appointments</b>	<b>YES</b>	<b>NO</b>
Q10	Once we are able to use on-line appointments with our new system, would you take advantage of this?	108	47

Once the results were received by the committee they were asked whether they wished to meet to determine an action plan and as they wished to meet this was organised. There now follows the minutes of that meeting which incorporates an action plan

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**Meeting of the Patient Reference Group Committee  
for The Harvey Practice  
which took place on Thursday 21st February, 2013 at  
18 Kirkway, Broadstone, Dorset at 12.30 p.m.**

**Present: Dr. L. Cartwright, Mr S. Archer, Mr. P. Field, Mrs. C. Ward, Mr. P. Jeffery, Ms. G. Cardy Mr. B. Muspratt and Mrs. Denise Hunter (Practice Manager).**

**Apologies for absence: Mrs. L. Ellis.**

1. A review of the Action Plan for 2011/12 took place and it was agreed that the actions had been successfully completed. The action plan indicated that a newsletter should be created for the Practice and that this should be issued at six monthly intervals giving helpful information about the practice and its plans. All of this should be in plain English. (Copies of Newsletter – Summer and Winter edition attached).
1. Having agreed that last years action plan had been completed, Mrs. Hunter gave a short update on what had happened during the current cycle. During the current year 12/13 the practice had endeavoured to recruit further patients to the virtual patient reference group. To this end all new registrations had a form attached to them in order that each new patient was aware of the group and could join if they wished. A notice was also put in the waiting areas of both the practice's sites. In addition the form was added to the practice brochure.

1. The results of the questionnaire for 2012/13 were discussed in detail and the following action plan was agreed.

Action required	Action to be taken by:	Date to be completed	Comments
<p><b>Newsletter</b> The next edition of the newsletter should include the following: Staff changes A piece on the changes to the NHS and what it means to patients. A day in the life of.....</p>	Practice Manager	July, 2013 (Summer edition)	
<p><b>Prescriptions</b> Amend website to include dropdown menu for prescriptions to enable site to be identified and also where prescription to be collected from e.g. surgery/list of chemists</p>	Practice Manager	April, 2013	
<p><b>Prescriptions</b> Investigate review dates on the right hand side of prescriptions to see whether this could be taken off as confuses patients</p>	Practice Manager	Immediately	
<p><b>General</b> Request from committee that all enclosures in correspondence should be “.doc” to enable easy opening</p>	Practice Manager	Immediately	
<p><b>General/Reception</b> Hand sanitizer (ioniser) next to self-service screen at reception Broadstone (Merley is already serviced)</p>	Practice Manager	April, 2013	

<p><b>Reception</b> A review of the reception area is to be undertaken +/- a consultant to see whether the confidentiality for patients can be increased.</p>	Practice Manager	June, 2013	If it is possible to increase confidentiality then this can be added to the patient newsletter
<p><b>On-line appointment system</b> Ensure that patients are made aware that when on-line appointments become available, this will not be the only system available to them to book their appointments. In addition when commencing the system it was recommended that adoption takes place in a small controlled manner.</p>	Practice Manager	July, 2013	Make this clear in the next newsletter

25th February, 2013