

Forestside Medical Practice

Description and Understanding our PRG Practice Profile (A, B & G)

Our practice profile is an understanding & to cater for all of our registered patients within our two sites (approximately 10800 patients). To have a basic understanding of the area and any pressures involved that may contribute to their health and well being enabling us to bring together a range of options and assessments through the health care journey. This is a two way process between clinician and patient supporting their healthcare needs prior to extending the pathway through secondary care. Our practice population varies within the two sites catering for younger families in Marchwood due to being close to a military site and Dibden Purlieu has an older generation catering for 75% of the Chronic Disease management.

Our practice population is broken down into different male and female age ranges helping the practice to understand and support patient needs:-

0-4 5-16 17-24 25-35 35-44 45-54 55-64 65-74 75-84 85-89 90+

The breaks down is:-

0-4 Males	379
0-4 Females	345
5-16 Males	793
5-16 Females	738
17-24 Males	474
17-24 Females	508
25-34 Males	577
25-34 Females	689
35-44 Males	694
35-44 Females	769
45-54 Males	823
45-54 Females	838
55-64 Males	623
55-64 Females	668
65-74 Males	471
65-74 Females	518
75-84 Males	292
75-84 Females	371
85-89 Males	66
85-89 Females	81
90+ Males	26
90+ Females	57

This then takes into consideration and ensures our PRG whether Face to Face or Virtual is a true representation of our practice population: (A)(B)

We ensured this by offering questionnaires within all clinics, at the point of registration, in our waiting rooms and on-line to gain a true reflection of the practice population

- Routine Health Checks
- Immunisation programme
- Learning Disabilities - Needs
- Childhood illnesses
- At Risk Groups
- Chronic Disease Management
- Sexual Health and Birth Control
- Education
- Support
- End of Life Care

Our Practice Population showed: (A)

- One practice working from two sites – Dibden Purlieu is the Main site and Marchwood the Branch site
- 58.5% of patients were registered at Dibden Purlieu and 41.5% at Marchwood
- 3.5% of our under 5 year olds are at our Marchwood site as opposed to 3.04% at Dibden Purlieu this was down to having a lot of young military families at Marchwood
- 15.86% of the under 25's are based at Dibden Purlieu where as 14.11% are based at the Marchwood which highlighted the need for education and support
- Marchwood surgery sees more coughs, colds, ear problems due to a slightly younger population, where as 74.85% of our chronic disease management is done at Dibden Purlieu

Methods taken to invite patients (B)

- Our opening hours and sessions worked are advertised on our on-line website, within practice leaflets, on our doors and notice boards displayed in our waiting rooms for all patients to see
- We posted letters out inviting patients to join our Patient Participation Group
- We offered through Face to Face GP invitation
- We offered face to face clinician invitation within our baby immunization clinics to attract young mums
- We offered face to face clinician invitation within our diabetic clinic to target at risk/chronic disease groups
- We offered face to face clinician invitation within our learning disability clinics to target the at risk – and their carer's
- Forms were given out by reception staff to promote and invite patients to join
- Forms were attached to new patient registration packs and given out to all
- Forms were placed by our self check in system for patients to take
- We added On-line application forms within our practice web-site
- Posters/leaflets were displayed within the waiting room

We will continue too offer and encourage patient participation through: (B)

- Face to Face GP and clinician invitation within consultations covering routine, at risk and chronic disease
- Forms will continue to be given out by reception staff at the front desk
- Forms will continue to be attached to new patient registration packs
- Forms placed by our self check in system
- On-line forms within our practice web-site
- Posters/leaflets in the waiting room

Size and profile of the PRG (A)

- We initially had 4 patients and Martin Cox who were willing to come into practice and meet with our practice Manager with the view to setting up the group which took place on the 24.2.2010 and from that meeting our agreement was to review the then current GP GPAQ questionnaires and bring responses/queries back to the next meeting. Following that meeting 1 member dropped out and one member passed away. So the group was put on hold and a mass
- 121 patients signed up to take part in the on-line survey and all were sent or given the questionnaire
- We now have 4 PRG Face to Face members
- 79 patients responded to our survey

Current PRG member breakdown is 79 (A & B)

93% white British
1% White Irish
1% Black African
3% Other

5% 17-25
7% 25-34
7% 35-44
16% 45-54
20% 55-64
25% 65-74
12% 75-84
5% over 84

- 50% Male
- 46% Female

Face to Face Current Member Breakdown (A & B)

100% White British
100% Male

25% 55-64
50% 65-74
25% 75-84

Agreed Areas of Priority with PRG (C)(D) (E)

- Following face to face contact 24.2.2010 with our PRG the priority agreed by them was our GPAQ questionnaire questions about the services we offered to our practice population which was appointments, OOH's and How did we do.
- Through the remainder of 2010 and into 2011 due to PRG member's unforeseen circumstances the group was put on hold as we lost two members.
- From April 2011 we pushed trying to enlist new members in practice, on our website, face to face, posters and on our notice boards, also attached to our registration forms and practice leaflets.
- Face to face comments on the 01.9.2011 from Patient Rep, staff and doctors alike it was agreed we were struggling to meet demand and it was further agreed that as we could not expand our face to face PRG we would look to the route of a virtual group. Leaflets were put in the waiting room, attached to our self check-in system, registration and practice leaflets
- From the meeting on the 1st Sept 2011 that led to a planned 6 month appointment pilot scheme at our main site only. letters were done notifying patients and asking for further comments to commence from 1.10.2011
- Contacted the PCT by phone to run it by them

The previously agreed questions remained the same meeting patient demands/needs which overwhelmingly set the priority for the questions which were sent to the PPG by e-mail for further comments.

- Appointments System
- Difficulty getting an appointment
- Opening Hours
- Additional Hours
- How the doctors/nurses/reception staff performed
- Following consultation – the patients understanding and ability to cope
- How satisfied were they
- How often were they seen

All the things our PRG needed to know to support our practice population and three of what the PCT needed to know

- Patient gender
- Age range
- Ethnic origin

Method used to identify the priority Areas From April 2011 (D and E)

- Letters sent out – Flyers in waiting room
- Face to Face initial meeting 1.9.2011
- From the meeting all members requested copies of the GP questionnaires
- Set up practice website and added the survey questions onto the website
- Notices on our Notice Board
- Discussed again with all staff and doctors.
- Paper questionnaire put in waiting room and offered to join our virtual group within clinics
- Audit closed, audited and results placed within our waiting room between 22-24 Feb 2012
- Met with Dianne Gouldie and discussed survey, results, advertising, questionnaires, notice boards and the way forward. (She sits on the Management LINK Board) she confirmed she was impressed with what we had achieved.
- To increase awareness we are currently looking at up-dating our notice boards

The Method Used for discussing and agreeing priorities (D & E)

- Partners meeting
- Letters sent
- Sign up of virtual group
- PRG and practice meeting
- Following on from meeting - questionnaire responses sent out by e-mail for virtual comments

Method used for the survey (C & D)

- Open to all patients
- Taking a representing sample from a cross section of our patients
- Making the questions as impersonal as possible
- We made the questions easy to answer
- We made the survey tick box answers for ease
- We opened the questionnaires up to all on line and paper copies in-house to cater for all patients
- Engaged with our PRG – face to face and on-line from the 1st Sept to the 22rd March 2012
- Paper audit
- On-Line Audit
- Face to face with reception staff
- Forms given out within Baby clinic

- Forms given out at disability check
- Forms given out in diabetic clinics
- Discussed again at all practice meeting with all staff and doctors on 17.1.2012

Method and rationale used to agree the questions (C)

- Our survey sought to see what patients thought of us, the services we offered and how we were performing – for us to do better
- The study sought to encourage patients to work with us to improve the services we currently offer with the view of improving for the future and encouraging them to tell us what they feel we need to do to meet their needs in the future and we did started this process by:
- Make changes to meet patient demand/needs by way of the virtual group setting priorities

An Analysis of the patients surveyed (G)

- Surveys was open to all patients
- 121 patients responded via a mixture of virtual or hard copy survey and formed our virtual group along with our three face to face members. This was done via e-mail
- 79 patients completed the survey

The general theme from the survey showed:-

- Overall the survey indicates that the practice is providing a good service and that the majority of patients are happy with the service.
- 8% showed Getting through to the surgery was a problem. This could just be down to peak times when calling – we need to watch this
- 18% showed our opening times as poor/fair – this could be down to just two negative comments – is it fair? – Or do we need to change further.
- Requests for evening and Saturday appointments took 57% of requests and as 55% of the respondents were of working age we need to consider Saturday mornings.
- 39% were happy with our current service and a further 25% liked evening appointments – this meant 64% endorsed the service we currently offer.
- 34% declined to answer how our nurses performed; this could be down to simply not seeing the nurse however; it could be we need to do better.

Method used for discussing the findings (F & G)

- Letters out in the waiting room from April 2011 and on our notice boards
- Questionnaires sent out from October 2011 to 22.3.2012 via e-mail and paper copies in our waiting rooms
- Asked PRG face to face and virtual via e-mail for comments between October 2011 and 22.3.2012
- Stopped audit 22.3.2012 and sent survey results out to Virtual on line group, PRG and Local Counsellor. Asked for comments Face to face and virtual via e-mail for PRG and Virtual PRG and face to face to PRG Lead (LINK) for their comments/overview on the survey and how we may improve and go forward into 2012

- 23.2.2012 Placed the audit results within our waiting room and on website – comments back to the practice can be given in, in person or placed in our comments box and on-line ones e-mailed back to us
- This remains a working document with the aim of increasing both Virtual PRG and Face to Face PRG working with the practice on behalf of our practice population

Amalgamated comments back from PRG's, staff and clinicians and they suggested that: (G)

- Overall the survey indicates that the practice is providing a good service and that the majority of patients are happy with the service.
- 8% showed Getting through to the surgery was a problem. This could just be down to peak times when calling – we need to watch this
- 18% showed our opening times as poor/fair – this could be down to just two negative comments – is it fair? – Or do we need to change further.
- Requests for evening and Saturday appointments took 57% of requests and as 55% of the respondents were of working age we need to consider Saturday mornings.
- 39% were happy with our current service and a further 25% liked evening appointments – this meant 64% endorsed the service we currently offer.
- 34% declined to answer how did the nurses perform – this could be down to simply not seeing the nurse however; could be we need to do better.
- We need to keep striving to do better
- It shows 2/3rds (64%) of patients endorsed the service we currently offer
- 1/3rd (32%) flagged up Saturday surgeries.
- Does our work load far exceed current staffing levels
- 34% declined to comment about our nursing services which could be down to just not seeing the nurse?

Feedback from on-line PRG was:- (F & G)

1. the results appear positive hope they are useful as I have always had a good service from all staff and doctors
2. thanks you for the survey responses
3. overall you seem to have happy and contented patients
4. No disagreement between practice and PRR
5. Feed Back from PRG (LINK Lead was positive)

Suggested Areas for Change (F, G & H)

- Look at out appointments system
- Was our telephone system working or was it just a peak times that their seemed to be a problem

Changes that were agreed from our virtual and face to face responses (F, G & H)

- Pilot our appointments system
- All practice Meeting 26th April to Discuss the findings further with PRG and practice staff to see whether we need to do a pilot study on the 32% Saturday morning surgeries during 2012-2013
- Two new partners starting in April will increase continuity of care
- Look at workload against staffing levels

- Re-run the audit specific to nursing staff to see if 34% is valid or if they never say the nurse
- Place findings on our website again
- Show findings to the PPG – develop further action plan
- Send findings to the PCT
- Ask PRG to agree future questions

Areas of Significant change that will impact on contractual arrangements (H & K)

- None Known
- No disagreement between the practice and the PRG has taken place so far – this remains on-going project

Actions Agreed (H)

1. continue/finish our pilot scheme of the appointments system
2. Discuss the audit results further at our next all practice meeting on the 26th April with the PRG, All staff and doctors.
3. whether we need to do a pilot study on the 32% Saturday morning surgeries during 2012-2013
4. Look at workload against staffing levels to improve waiting times
5. Re-run the audit specific to nursing staff to see if the 34% who declined to respond is a valid response or if they had not seen a nurse so did not complete the answer
6. Meet and ask our PRG what questions we need to ask in this coming year

Order of priority is: - (H)

- 2.
- 1.
- 5.
- 4.
- 3

Time Scale (H)

Order of priority is:-	Date By
- 2.	26.4.2012
- 1.	26.4.2012
- 5.	Between June – August 2012
- 4.	Sept 2012
- 3	By 31.3.2013

Opening Hours (I & J)

Didsen Purlieu

Monday – Friday 8.30am to 1.00 – 2.00 to 6.30pm

(Telephone lines open from 8.00am)

To book an appointment Telephone: 02380 844546

Advice Line 02380 877900 8.00am to 6.30pm

Marchwood

Monday Thursday 8.45am – 6.00pm

Tuesday 8.45am to 1.00pm – 2.00pm to 6.00pm

Wednesday 8.45am to 1.00pm – 2.00pm to 5.30pm

Friday 8.45am to 1.00pm – 2.00pm to 5.00pm

(Telephone lines open from 8.45am)

To Book an appointment Telephone: 02380 871233

Advice Line 02380 877900 8.00am to 6.30pm

Extended Hours

Thursday Evenings

**6.30pm – 9.15pm Alternating between
both Surgeries' every other week.**

Forestside Medical Practice Survey Results (G)

Number of Responses: **79**

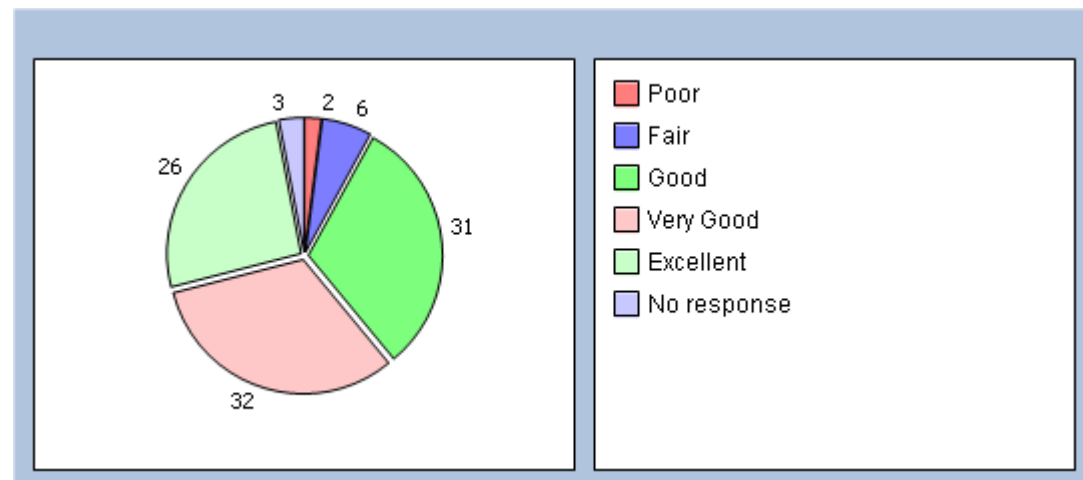
Dear Patient,

Many thanks for agreeing to take this short survey to help our practice understand how our appointment system and consultation process can be improved; if at all.

Please answer all of the questions and click Send when you are done.

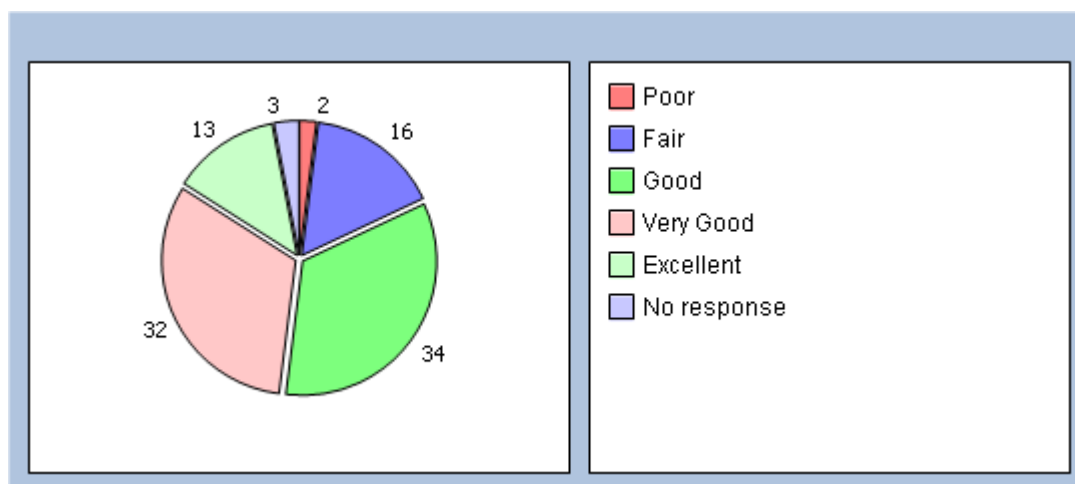
Q1: How difficult was it to get through to your surgery?

Poor **2%**
Fair **6%**
Good **31%**
Very Good **32%**
Excellent **26%**
No response **3%**



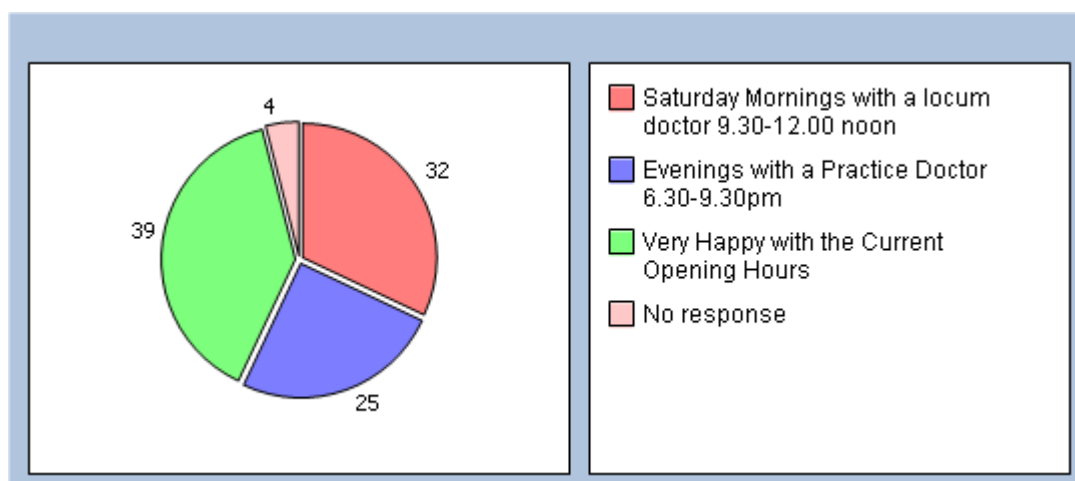
Q2: How do you rate the surgery opening hours?

Poor **2%**
Fair **16%**
Good **34%**
Very Good **32%**
Excellent **13%**
No response **3%**



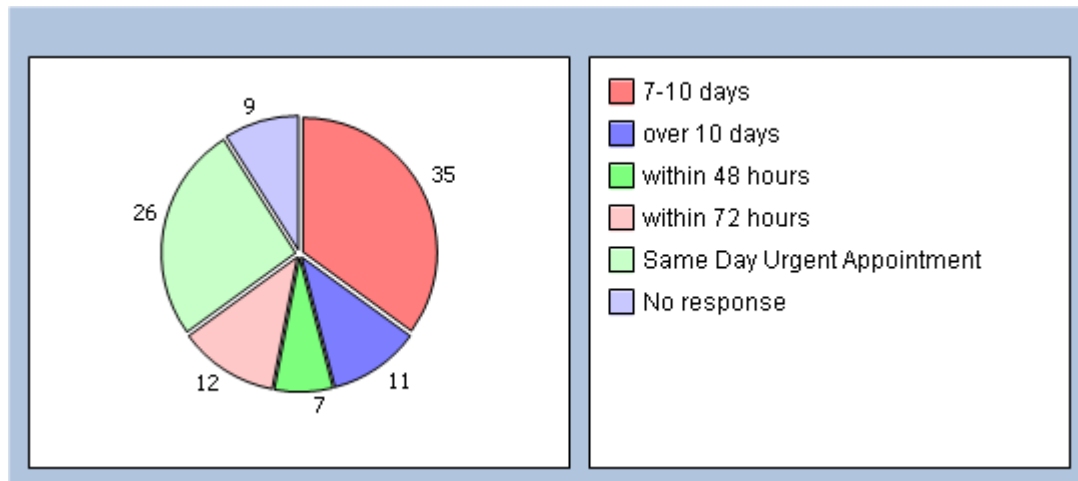
Q3: What Additional Hours would you like the practice to be open?

Early Mornings with a locum doctor 7-8am **0%**
 Saturday Mornings with a locum doctor 9.30-12.00 noon **32%**
 Evenings with a Practice Doctor 6.30-9.30pm **25%**
 Very Happy with the Current Opening Hours **39%**
 No response **4%**



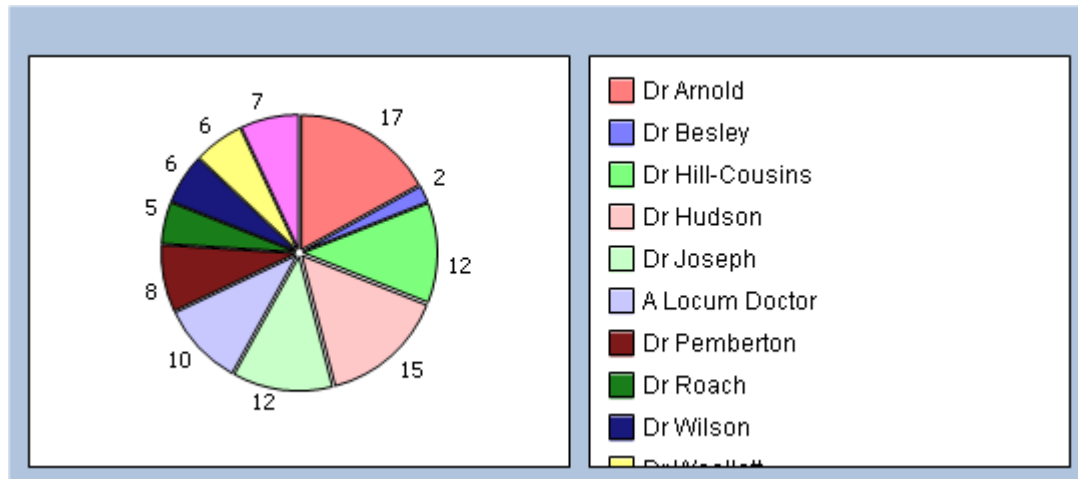
Q4: Within what timescale were you offered an appointment?

7-10 days **35%**
 over 10 days **11%**
 within 48 hours **7%**
 within 72 hours **12%**
 Same Day Urgent Appointment **26%**
 No response **9%**

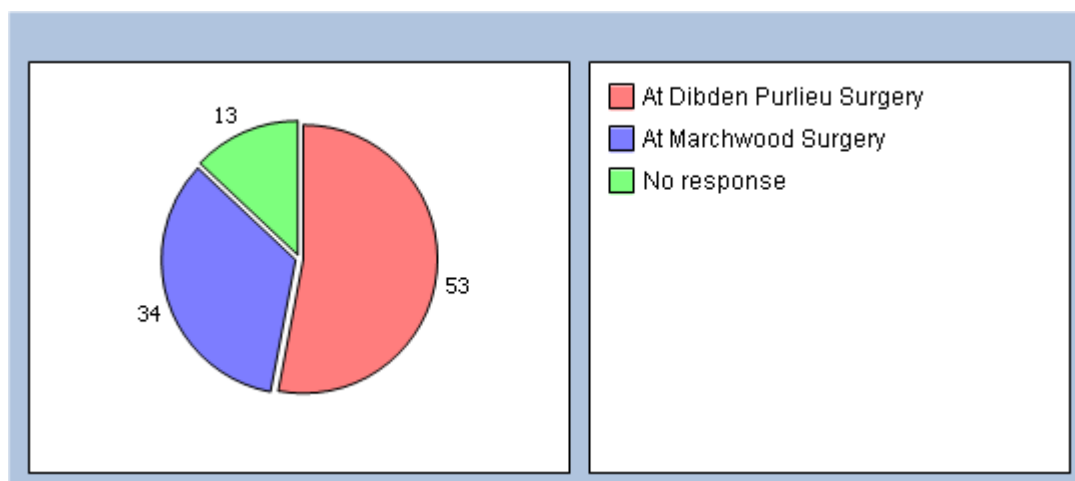


Q5: Which doctor did you see and at what site?

Dr Arnold **17%**
 Dr Besley **2%**
 Dr Cooper **0%**
 Dr Hill-Cousins **12%**
 Dr Hudson **15%**
 Dr Joseph **12%**
 A Locum Doctor **10%**
 Dr Pemberton **8%**
 Dr Roach **5%**
 Dr Wilson **6%**
 Dr Woollett **6%**
 No response **7%**

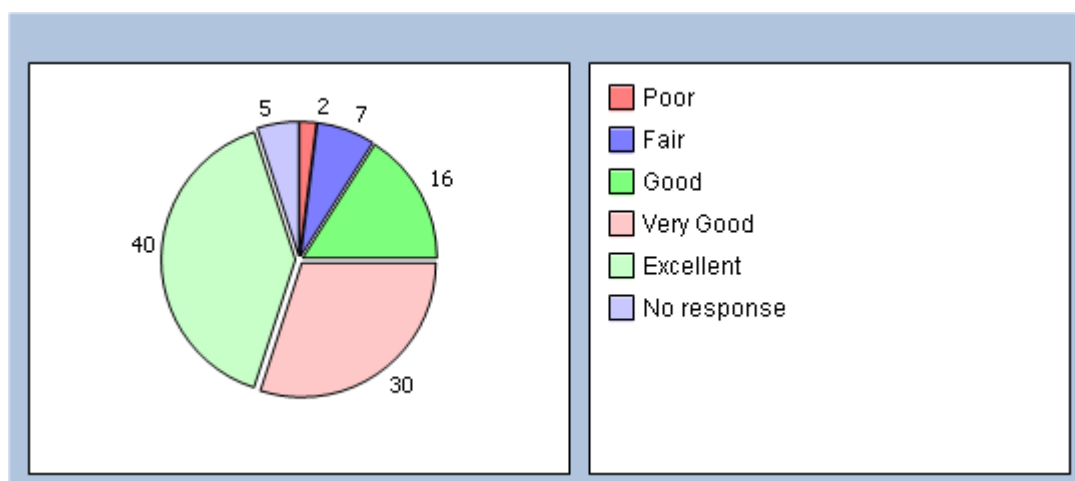


At Dibden Purlieu Surgery **53%**
 At Marchwood Surgery **34%**
 No response **13%**



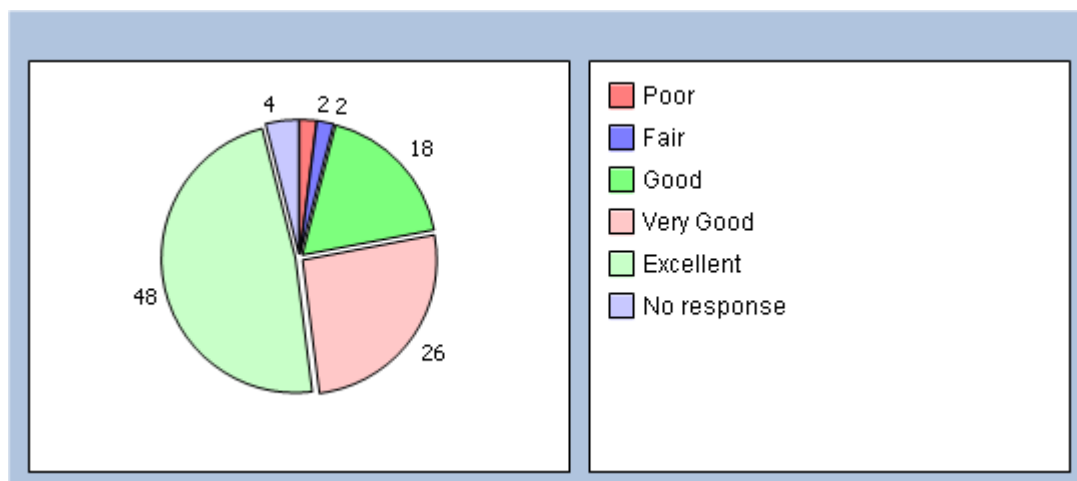
Q6: Did the doctor ask enough questions about your current problem?

Poor **2%**
 Fair **7%**
 Good **16%**
 Very Good **30%**
 Excellent **40%**
 No response **5%**



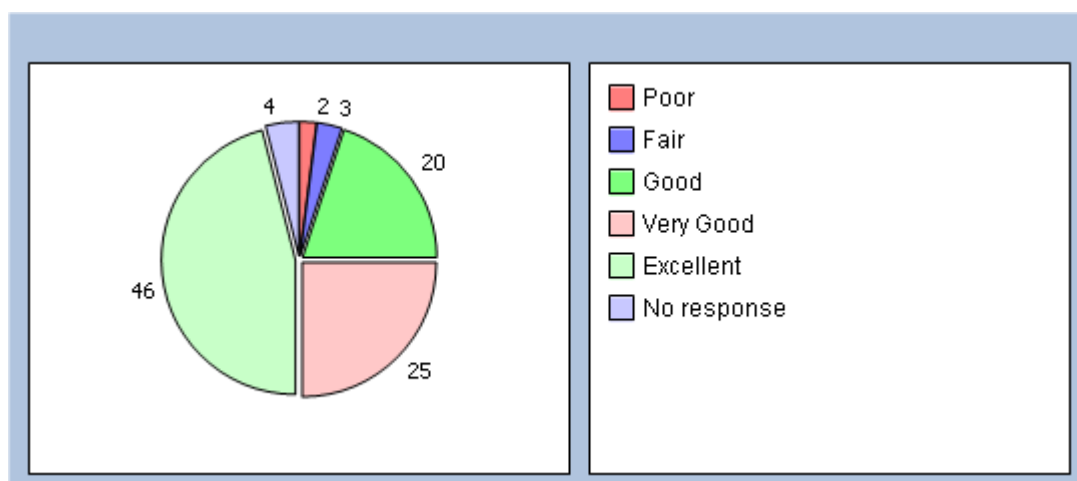
Q7: Did the doctor listen and hear what you had to say?

Poor **2%**
 Fair **2%**
 Good **18%**
 Very Good **26%**
 Excellent **48%**
 No response **4%**



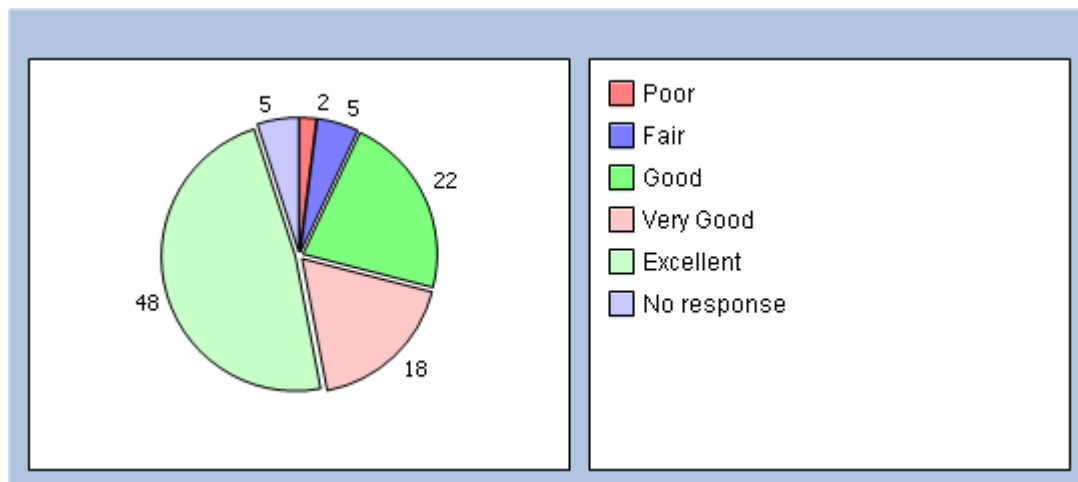
Q8: Did the doctor put you at ease?

Poor **2%**
 Fair **3%**
 Good **20%**
 Very Good **25%**
 Excellent **46%**
 No response **4%**



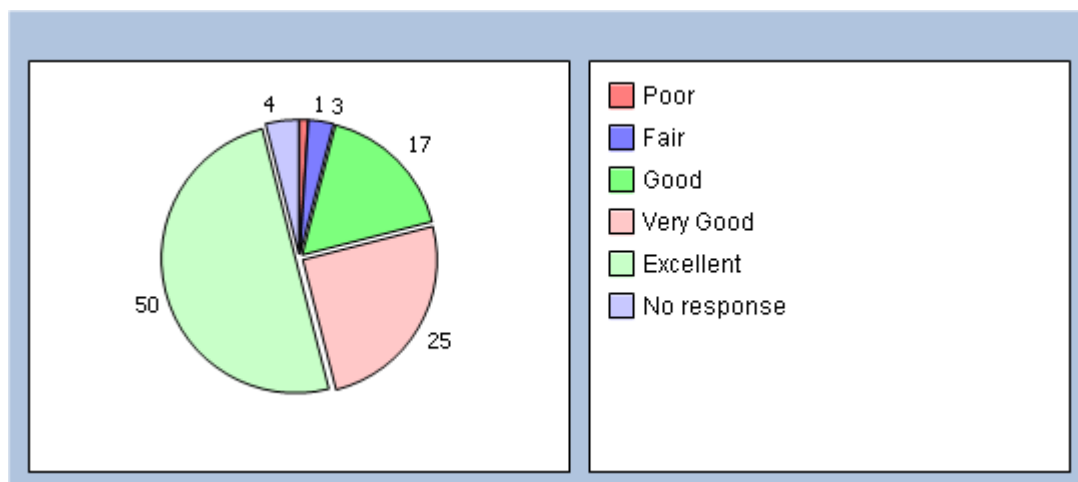
Q9: Did you feel involved in the decisions made about your care?

Poor **2%**
 Fair **5%**
 Good **22%**
 Very Good **18%**
 Excellent **48%**
 No response **5%**



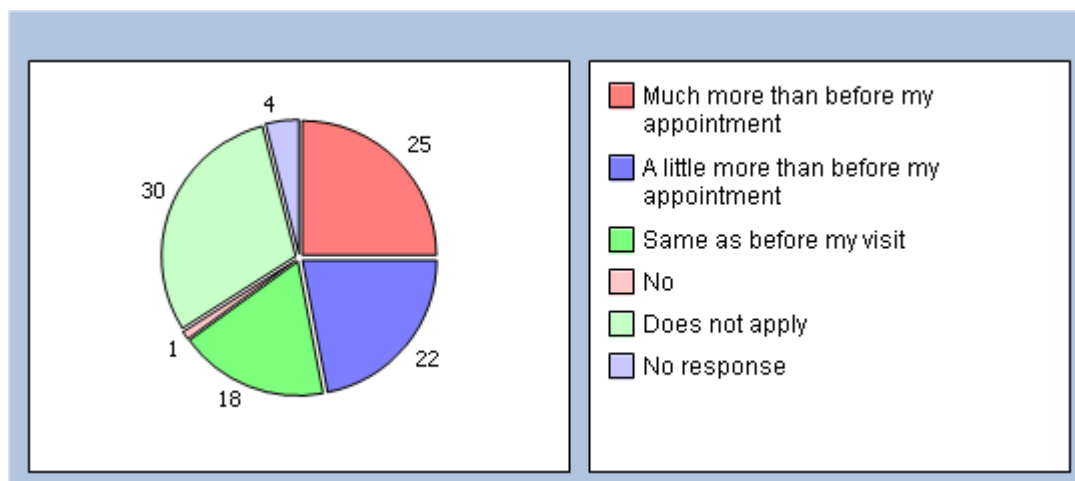
Q10: Did the doctor show patience with your questions/worries today?

Poor **1%**
 Fair **3%**
 Good **17%**
 Very Good **25%**
 Excellent **50%**
 No response **4%**



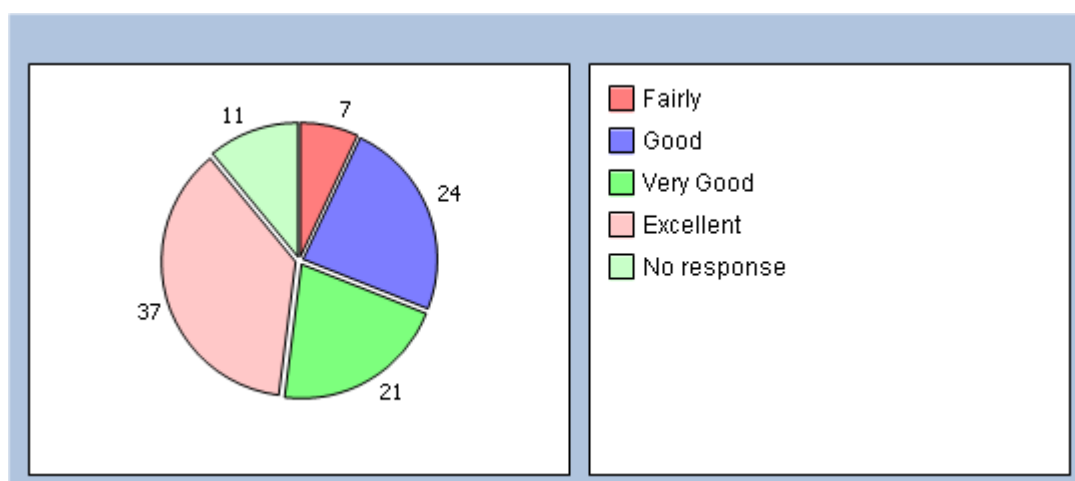
Q11: After seeing your doctor today do you feel able to understand and cope with your problem?

Much more than before my appointment **25%**
 A little more than before my appointment **22%**
 Same as before my visit **18%**
 No **1%**
 Does not apply **30%**
 No response **4%**



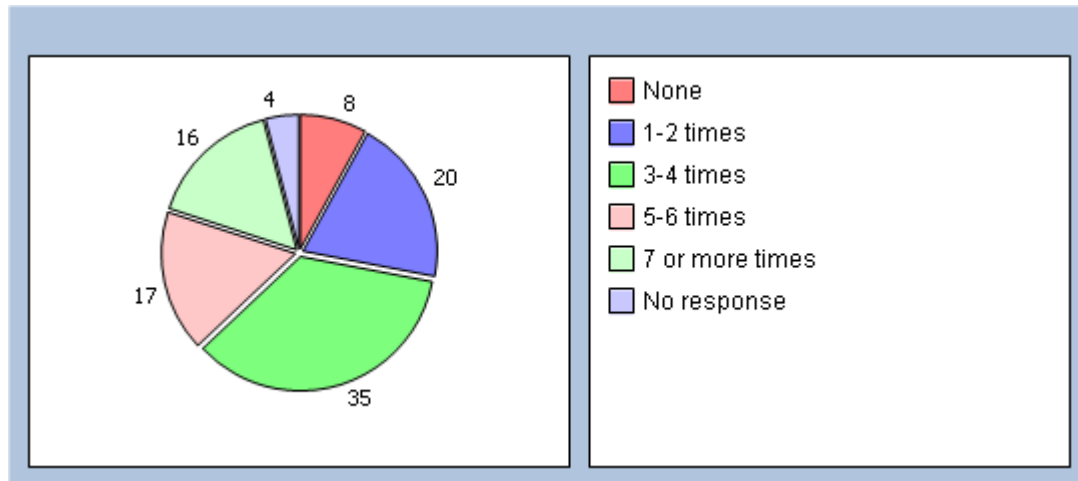
Q12: How satisfied are you with your appointment today?

Fairly **7%**
 Good **24%**
 Very Good **21%**
 Excellent **37%**
 No response **11%**



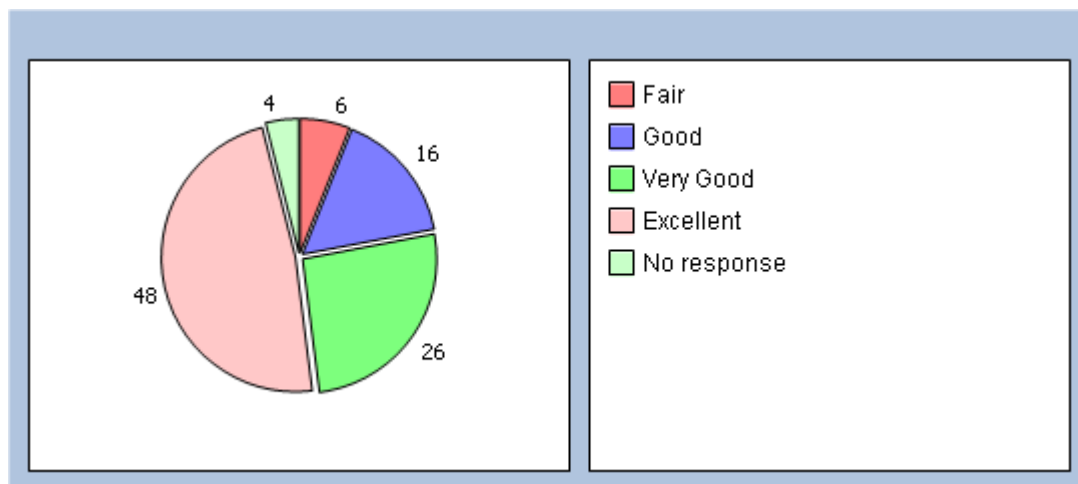
Q13: How often in the past 12 months have you been seen by a doctor?

None **8%**
 1-2 times **20%**
 3-4 times **35%**
 5-6 times **17%**
 7 or more times **16%**
 No response **4%**



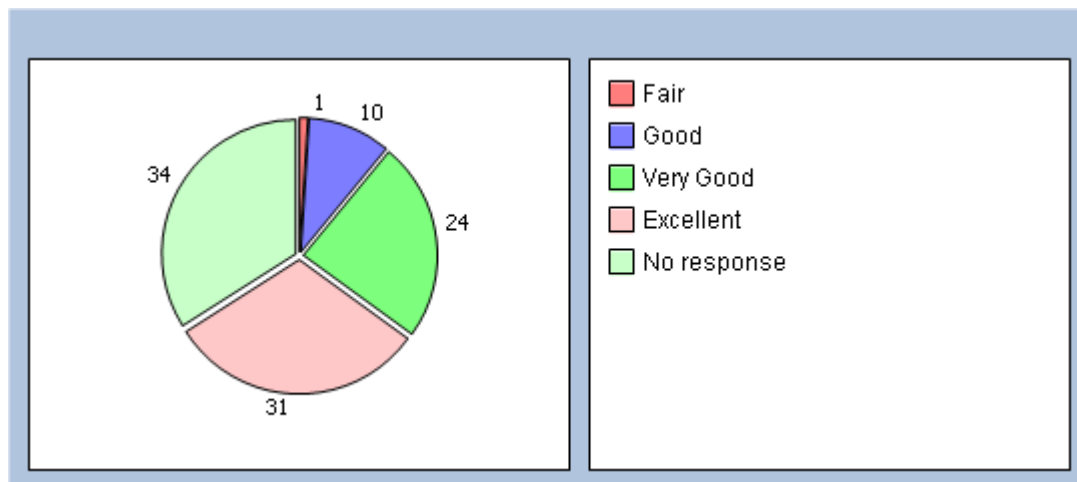
Q14: How helpful did you find our Reception Staff?

Fair **6%**
 Good **16%**
 Very Good **26%**
 Excellent **48%**
 No response **4%**



Q15: How helpful did you find our Practice Nurse?

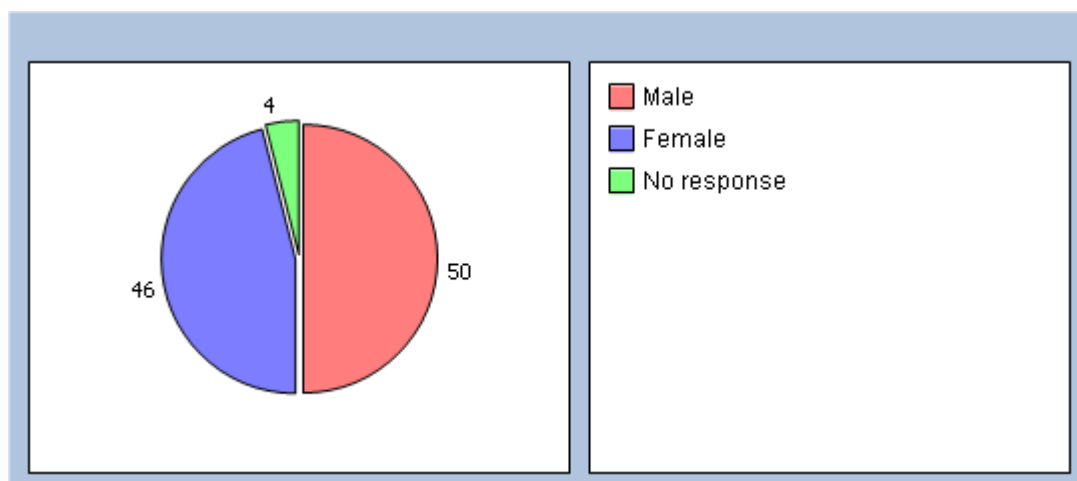
Fair **1%**
 Good **10%**
 Very Good **24%**
 Excellent **31%**
 No response **34%**



To help us analyse your answers please tell us a few things about yourself:

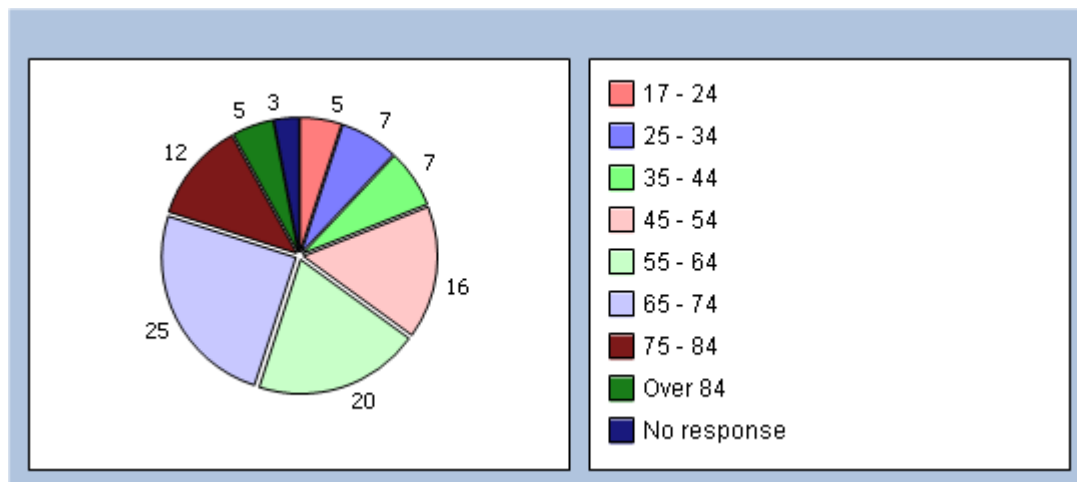
Are you male or female?

Male **50%**
 Female **46%**
 No response **4%**



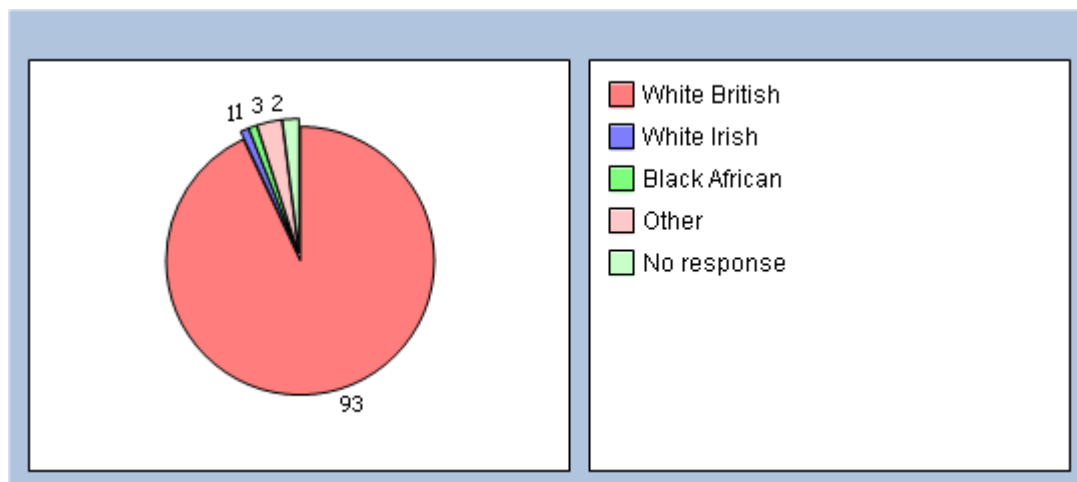
What age are you?

Under 16 **0%**
 17 - 24 **5%**
 25 - 34 **7%**
 35 - 44 **7%**
 45 - 54 **16%**
 55 - 64 **20%**
 65 - 74 **25%**
 75 - 84 **12%**
 Over 84 **5%**
 No response **3%**



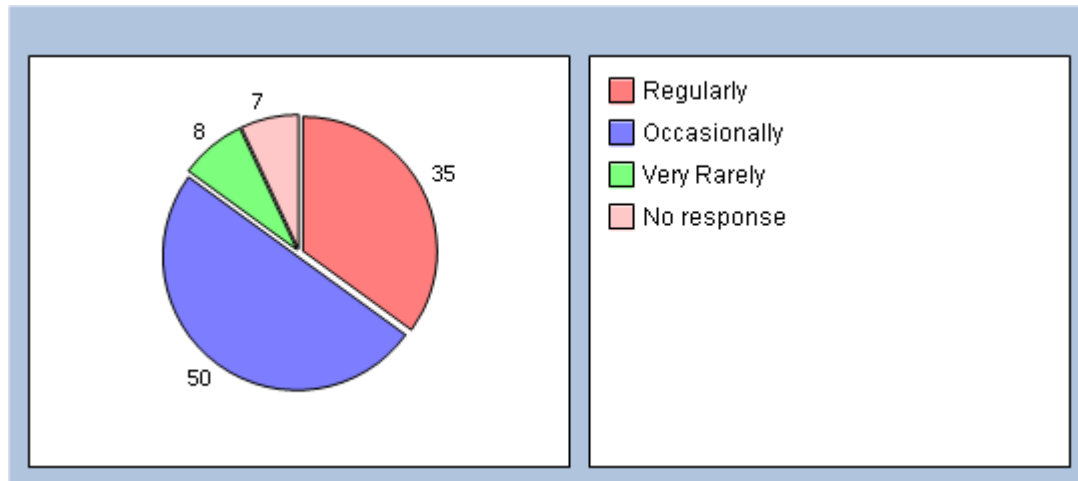
What is the ethnic background with which you most identify?

White British **93%**
 White Irish **1%**
 Mixed White & Black Caribbean **0%**
 Mixed White & Black African **0%**
 Mixed White & Black Asian **0%**
 Indian **0%**
 Pakistani **0%**
 Bangladeshi **0%**
 Black Caribbean **0%**
 Black African **1%**
 Chinese **0%**
 Other **3%**
 No response **2%**



How would you describe how often you come to the practice?

Regularly **35%**
 Occasionally **50%**
 Very Rarely **8%**
 No response **7%**



Many thanks for your time in answering the questions on this survey.

Step 6: Publicise actions taken and subsequent achievement

The achievement of this step will be dependent on practices being able to demonstrate that they have publicized actions taken and subsequent achievement. NHSH will require a copy of the Practice Report which should contain supporting information outlining the requirements of the DES for each step undertaken. Does the report provide the following?

A descrip- tion of the profil-e of the PRG	Steps taken to ensure the PRG is representative of the practice's registered patients and where that has not been possible, evidence of action taken by the practice to engage with a representative group of their practice population	(A)	(B)
Details of steps taken to agree which areas were included in the practice survey	The manner in which the practice sought views of registered patients	(C)	(D)
Details of the actions plan setting out how the findings and/or proposals arising from the survey can be implemented if appropriate reasons why findings/proposals could not be implemented	Summary of evidence including any statistical evidence of findings or basis of proposals arising from the survey	(E)	(F)
Details of the actions , which must include details of relevant actions that the PCT intend to take (in accordance with contractual arrangement) , in the second year of participation of this scheme details of previous issues and priorities agreed	The opening hours of the practice and the methods for patients to access services in core hours (opening hours must also appear in the practice leaflet)	(H)	(I)
Where the practice participate in the Extended Hour Scheme DES arrangement, the time and days of the weekly sessions provided and	In the event of a disagreement between the practice and the PRG, details of the disagreement highlighting the practices rationale for deviating from the plan	(J)	(K)
Confirmation is required that the practice published the Report as a minimum on the practice website, NHS Choices and made hard copies available for patients in the waiting room		(L)	
Yes	Yes		Yes