

PATIENT REFERENCE GROUP REPORT 2013-2014

West Rainton surgery patient reference group (PRG) was formed to act as a forum for gaining patient views and acting on the views of the patients to provide a service that best reflects these views.

Practice population has a high percentage of elderly residents and has 5 residential/nursing homes within its boundaries. Surgery also has a high level of unemployment and drug/ alcohol misuse

Members of the West Rainton PRG are a vital link to the practice population, other networks and groups and PRG members may also be involved in activities such as community groups, attending Health watch meetings etc. PRG members are regularly sent invitations to Healthwatch meetings which allows the PRG to be aware of the views of the local community and facilitates two way communications.

Practice PRG membership consists of both male and female registered patients of the surgery. The age range of the current membership of the PRG is between 40 and 64 years.

To ensure that all patient categories are represented within the PRG the surgery has implemented the following measures to ensure that the PRG includes the broadest possible range of patient views.

- Information on the PRG is included in every new patient pack.
- An invitation to join the PRG is included in every new patient pack.
- A 'have your say' functionality button on the surgery website.
- A suggestion box in reception area with form for patient to complete.
- Patients can speak to senior staff members personally to raise issues.
- PRG members can attend meeting in person or be a virtual member of the PRG.
- Any complaints made are fully investigated and acted upon.
- Posters in reception advertising PRG role and inviting attendance.

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Dr Sally Carmichael MBBS MRCGP
Dr Sarah Parkinnen MAMB BChir MRCGP DCH DFFP DRCOG
Dr Michael Wallace MBChB MRCGP
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This offers all patients of the surgery a chance to participate in the future planning of the surgery and commissioning of services.

PRG meetings take place regularly every quarter at the surgery or on some occasions they are virtual online meetings. PRG members discuss and agree the key areas of concern/most important issues at the quarterly meetings.

In November 2013 a virtual meeting was then held between the PRG members to identify the key areas of concern and a questionnaire was agreed.

The questionnaire was then launched in late November/early December 2013. This was given out at reception and dispensary desks and online for patients of all ages to complete. A selection of non contact patients were sent the questionnaire via post to complete and return. We also introduced a suggestion/comments box was introduced to the reception area.

The methodology used to collate the views of the surgery's registered patients was a survey distributed in reception by post and online via the surgery website.

The survey results were then collated and a report was drawn up from which the patient Survey Action Plan was formed. This, plus the results of the survey were sent to the PRG members for discussion and approval before the results of the survey were published. Any additional issues were added to the action plan at that point and approval was reached with PRG members. In summary the points raised were:

Difficulty in contacting the surgery at 8:00am

- Inability to contact surgery at lunchtimes
- Saturday morning surgery
- Limited car parking
- Issuing of repeat prescriptions
- Lighting in GP rooms
- Nurse Practitioner Service (for more minor ailments)

After gaining approval from the PRG members (via email) the results of the survey and the action plan were displayed in the surgery and made available on the surgery website. Posters were also displayed on the surgery notice boards.

The surgery partners and all staff have had discussions regarding the result of the survey and the Action Plan.

An agreement was reached to employ a nurse practitioner. During early 2014 a staff meeting was held to discuss changes to the rota, opening times and prescribing to reflect action plan.

West Rainton Surgery

Patient Survey Action Plan 2013 – 2014

Patient Experience/Issue Raised	Action	Action Taken	By Who	Progress
Nurse practitioner service would be useful	A nurse practitioner employed at the surgery	Leaflets regarding new service displayed at the surgery and on the website. Leaflets also placed into new patient packs and available at practice reception	Rachel Low	Complete
Issuing of repeat prescriptions	Ensure all patients are aware of the alternative options for ordering prescriptions	Review advertising of repeat prescription ordering. Blank slips are available at Issuing of Repeat Prescriptions dispensary and reception counter for patients to complete. Leaflets given with new patient packs and leaflets available in the surgery	Rachel Low Amanda Slater	Complete
Poor lighting in consulting room	Lighting to be replaced	Within 24 hours lighting had been replaced	Amanda Slater	Complete
Difficulty contacting the surgery at 8:00 am onwards	To improve access at 8:00am	Rota redrawn to maximise the number of staff available at 8:00 am	Rachel Low Amanda Slater	Complete

“	“	Look at telephone system to see if improvements can be made	Rachel Low	New system to be installed on the 8 th of April 2014
Parking limited	To maximise the effectiveness of the limited parking available	No improvement to be made as land adjacent to surgery is currently being redeveloped	Rachel Low	Ongoing
Saturday morning surgery	To provide weekend service even once monthly	Winter Pressures Scheme Saturday morning surgeries from October 2013 until March 2014. This has now been extended until the end of May 2014 and we anticipate will continue.	Rachel Low/CCG	Complete
Inability to contact the surgery over lunchtime	To improve access at lunchtime	Review of the opening hours. Emergency line calls are available	Rachel Low	Complete