

# Alma Medical Centre Patient Participation Group

*Promoting Health in Stockton-on-Tees*

## 2012 Local Participation Report

### Profile of the members of the PRG

The Patient Representative Group was established in September 2011. The current membership of the PRG is reflective of patient groups that have flexibility around working and income and potentially have free time to become involved in issues that reflect their understanding and expectation of healthcare services. In practice / patient demographics Alma Medical Centre are representative of a younger, family based community with some 23.75% of all patients being in the under 18 years age group.

To date the Patient Representative Group is:

- 30.5% Male and 69.5% Female

The Age / Sex Profile of the Patient Representative Group is:

Age Group	Female	Male
18 and under	0%	4.3%
19-29	4.3%	4.3%
30-39	30.4%	4.3%
40-49	13.3%	0%
50-59	17.2%	13.3%
60-69	4.3%	4.3%
70-79	0%	0%
80-89	0%	0%
90+	0%	0%

In comparison the age / sex profile of the practice population is:

Age Group	Female	Male
18 and under	1214	1204
19-29	1515	1373
30-39	577	563
40-49	552	566
50-59	526	564
60-69	368	440
70-79	217	228
80-89	154	95
90+	20	5
	<b>5143</b>	<b>5038</b>

The Patient Representative Group consists of registered patients who have:

- Engaged in the Patient Participation Group surveys and have registered an email address.
- Not engaged in a Patient Participation Group survey but have registered an email address.

The ethnicity of the Patient Representative Group is:

- 4.3% Ethnic Groups
- 4.3% British or Mixed British
- 73.9% White British
- 4.3% White & Black African
- 13.2% Undeclared

96% of the Patient Representative Group members attend appointments on a regular basis.

**The steps taken by the contractor to ensure that the PRG is representative of its registered patients and where a category of patients is not represented, the steps the contractor took in an attempt to engage that category.**

The first decision taken to ensure that the PRG is representative of Alma Medical Centre registered patients was the decision to make the group a 'virtual' one. This allows patients to participate in their own time and at their own convenience.

A further decision was taken that hard copies of all communications will and have been made available to enable all patients to participate, regardless of their ability to access a computer.

The second step to ensure that the PRG is representative of Alma Medical Centre registered patients is the establishment of the Patient Representative Group which has been advertised:

- On the practice website
- In the Practice Reception
- In the Patient Participation newsletters
- On notice boards throughout Alma Medical Centre.
- On notice slips provided by staff.

This was done to ensure that all registered patients could find out information about the Patient Representative Group regardless of whether they were attending one of the Practices' surgeries.

It was also agreed between the Practice Manager and Project Co-ordinator that a clear definition of the roles and responsibilities of those participating understand their roles in the scheme and therefore produced an Engagement Strategy, a copy of which is included in the appendix.

The practice is currently exploring the use of text messaging technology to promote the Patient Representative Group. If feasible this will enable the practice to target those groups which are not currently represented.

The practice has considered having meetings on evenings and weekends to attract patients in Education, Employment or Training, as well as those with children at school. However, patients in these groups have, unfortunately, not been forthcoming or are unable to offer their time.

**Details of the steps taken to determine and reach agreement on the issues which had priority and were included in the local practice survey**

The Practice has appointed a Project Co-ordinator whose responsibilities include taking a lead role in the facilitation of communication with registered patients, the PRG and the PPG.

The Project Co-ordinator has no prior involvement with the practice or the registered patients and therefore provides an independent point of reference for patients' issues or priorities to be raised.

At the inception of the scheme an information leaflet and poster regarding the establishment of the Patient Participation Group were created, distributed and displayed in Reception (a copy of the information leaflet and the poster is available upon request). In addition a webpage was added to the practice website specifically for Patient Representative and Participation Groups, with the same information as contained within the leaflet.

- The poster clearly outlines that these groups' activities are directed by the views and opinions of registered patients. The poster also directs patients to the information leaflet and practice website for further information.
- The information leaflet and webpage outlines the requirement of registered patients, the method and frequency of patient participation group surveys, the method and frequency of patient participation group survey results being published and encourages patients to both register their interest in participating with the PPG and PRG and put forward the issues and priorities they wish to be raised.

It was decided that September and October 2011 should be used to advertise the Patient Participation Group and Patient Representative Group and the first Patient Participation Group survey would take place in November 2011.

As no patient had declared their interest in participating with the PRG and PPG by mid-October 2011 there was no patient chosen issue to survey. Therefore, the Practice Manager and Project Co-ordinator decided to proceed with the first survey following discussions with a local Practice that had recently established a PRG and PPG as well, as well as a review of the NHS Choices website chose the subject of "Missed and Emergency Appointments".

During the first survey patients declared their interest in participating in the PRG and PPG. Each of these individuals were directly contacted with a request to put forward any issues or priorities they wish to have raised. By mid-December 2011 there were still no issues or priorities raised.

The Practice Manager reviewed the analysis of the "Missed and Emergency Appointment" survey, detailed below, and consulted the Practice GPs on a survey topic. The agreed upon topic was "Who Do You Contact?" as it succinctly followed on and would further highlight patients' awareness of NHS Services and when they should be contacting them.

Once again during the January PPG survey, patients declared their interest in participating in the PRG and PPG. Each individual that had declared their interest to date was directly contacted with a request to put forward any issues or priorities they wish to have raised. However, by mid-February 2011 there were still no issues or priorities raised.

The Practice Manager and Project Co-ordinator reviewed the NHS Choices website and consulted the Practice GPs before deciding upon the topic of "Prescription Ordering" for the March 2011 survey.

As the scheme has continued every newsletter and survey has encouraged patients to put forward the issues and priorities they wish to be raised and thanked all those who have participated in the latest survey and, if so, provided feedback on survey results.

### **The manner in which the contractor sought to obtain the views of its registered patients**

It was apparent from previous annual GPAQ patient surveys that responses were often returned incomplete, possibly due to their length.

It was therefore decided that the surveys would take place bi-monthly, cover a set topic and be kept short to five main questions any sub questions would to be kept to a minimum.

The structure of each survey was decided to be kept in all possible circumstances to four set questions, with the fifth being "Do you have any comments specifically about ...(insert survey topic)? Is there anything else you wish to comment on? We are interested in any other comments you may have."

The reason for this fifth question is that it enables further opportunity for patients to express any views and opinions they may have and provides an opportunity to raise an issue or priority. The open-endedness of the question is a result of previous practice survey findings, which have shown the most useful information coming from patient comments.

When the results of the latest survey are published in the following months newsletter, patient feedback gathered during the latest survey is published anonymously along with any response felt necessary by the Project Co-ordinator, Practice Manager and GP's. This enables any patient to view, respond or add to, any feedback provided.

**Details of the steps taken by the contractor to provide an opportunity for the PRG to discuss the contents of the action plan.**

Contact is currently made directly to the Patient Representative Group members via their registered email address. However, if there is ever a patient who registers their interest in joining the Patient Representative Group but does not have access to a computer then hard-copies of communications would be sent to them for review.

Each member of the Patient Representative Group is sent electronic copies of the newsletters in which the results and patient feedback from each survey is included.

When the results and feedback of the latest survey are published in the following months newsletter PRG members are emailed electronic copies and asked to provide their feedback, propose actions or comments and propose further issues or topics.

As there have been only 2 actions arise out of the PPG activities the Practice Manager and Project Co-ordinator decided to produce a Patient Representative Group feedback form in early February 2012. These forms have been distributed to patients visiting Reception since early February and emailed directly to any PRG and PPG participant that had registered an email address.

The response rate to these PRG feedback forms was initially slow but has picked up significantly since the start of March 2012. A review and analysis of all the feedback will take place in April and May 2012 and a revised action plan will be distributed in June 2012, to all the PRG members registered by that time.

**Details of the action plan setting out how the finding or proposals arising out of the local practice survey can be implemented and, if appropriate, reasons why any such findings or proposals should not be implemented.**

The action plan covering the whole scheme for the Patient Representative Group and the Patient Participation Group is in the appendix.

There have been two actions arise out of the Patient Participation Group surveys. Both cover the same issue of patient awareness. The first as a result of the 'Missed and Emergency Appointments' Survey in November 2011 and the second as a result of the 'Who Do You Contact?' survey in January 2012.

The 'Missed and Emergency Appointments' survey informed the Alma Medical Centre Management Team, as well as the patients, that of the respondents that had attended hospital via a GP Referral, Emergency Admission or Accident and Emergency, only 61% actually kept their appointment.

It also became apparent that only a small percentage of the respondents perceived the costs of attending by either of these methods could be as much as the practice has been charged.

Therefore patient awareness regarding the importance of attending Hospital Services appropriately, the benefits to their treatment and care attending appropriately has, as well as the awareness of the costs involved in Hospital Services needs to be raised.

This will result in the patient perceiving a value in their treatment and care as well as reducing financial impacts on Alma Medical Centre.

The 'Who Do You Contact?' survey highlighted that in the majority of scenarios put to the patients almost 20% would not contact the most appropriate service. This rises to over 30% in the scenario of severe chest pains and over 50% in the scenario of wanting more information or advice about what to do next regarding their illness or injury.

As an immediate action the Practice Manager produced an information section on the NHS campaign 'Choose Well' for the February 2012 newsletter.

Proposal actions to raise patient awareness on both these issues will be included in the June 2012 action plan.

## **A summary of the evidence including any statistical evidence relating to the findings or basis of proposals arising out of the local practice survey**

As mentioned above each survey takes place bi-monthly, covers a set topic and is kept short to five main questions any sub questions would to be kept to a minimum.

### ***November Survey: Hospital Services***

- 14% of the respondents thought £352 was the cost that could be incurred for a visit to GP Referral.
- 39% of the respondents thought that £136 was the cost that could be incurred for a visit to Accident & Emergency.
- Only 2% of the respondents thought that an Emergency could cost Alma Medical Centre over £9,000.
- 66% attended hospital via GP Referral, only 61% of which said they had kept their appointment.
- 27% Emergency Admission attended hospital via GP Referral.
- 45% Accident & Emergency attended hospital via GP Referral.
- 70% of respondents thought their visit to hospital was a good use of hospital time.
- 68% felt their visit was good use of their own time.
- 73% thought their visit added to their care / treatment.
- 24% thought their treatment could have been provided out of hospital by their GP during appointment, the out of hours service of a walk in centre

### ***January Survey: Who Do You Contact?***

- 67% of respondents correctly identified that if you have a severe chest pain then you should contact the emergency services. 33% said they would use the alternative services available.
- 87% of respondents correctly identified, if you have an illness or injury that won't go away a GP appointment is the most appropriate health service to contact to obtain treatment. However, 6% said they would contact Accident & Emergency.
- 16% of respondents said they would contact their GP first regarding a common cold. However, we were delighted that 81% said they would contact their Pharmacist or NHS Direct for advice.
- 41% of respondents said they would contact NHS Direct for more information or advice about what to do next regarding their illness or injury. 47% of respondents said they would contact their GP. Once again there were respondents, albeit only 1%, who said they would contact Accident & Emergency.

**Details of the action which the contractor,**

**i. and, if relevant, the PCT, intend to take as a consequence of discussions with the PRG in respect of the results, findings and proposals arising out of the local practice survey.**

As detailed above, patient awareness of the implications to both themselves and the practice of missed appointments and using the most appropriate NHS service could be improved.

As a result proposals on how to raise awareness of patients on both issues will be included in the June 2012 action plan. The action plan will also tackle the issues and priorities raised from the Patient Representative Group feedback forms issued in February 2012, that will be reviewed and analysed in April and May 2012.

**ii. where it has participated in the Scheme for the year, or any part thereof, ending 31 March 2012, has taken on issues and priorities as set out in the Local Patient Participation Report.**

We have taken part in the Scheme for the year ending 31 March 2012 and we will take on the issues and priorities set out in this Location Patient Participation Report, as well as any other issues and priorities set out during the remaining months of the Scheme.

**The opening hours of the practice premises and the method of obtaining access to services throughout the core hours**

***Alma Medical Centre is open:***

Monday to Friday: 8:30-6pm.

Saturday: 7:30am to 12noon.

Reception staff are available during these times to respond to patients either in the practice or on the telephone. They can make appointments, note queries and respond to a range of patient requests. Reception staff will always try to respond as quickly as possible to patient queries and requests but response times may be dependant on the availability of the doctor on call.

If patients need to speak to a doctor or nurse during surgery opening times, the receptionist will take the patients details and pass any requests to the doctor on call. The on call doctor may need to telephone the patient back if they need further clarification.

Patients can also request repeat prescriptions during or outside of the core operating hours by:

- Leaving their computerised slip at reception or in the repeat prescription box.
- Posting their computerised slip with a stamped addressed envelope.
- By telephone
- Using the practice website.

**Where the contractor has entered into arrangements under an extended hours access scheme, the times at which individual healthcare professionals are accessible to registered patients.**

Under the extended hours access scheme individual healthcare professionals are accessible to registered patients at:

***Alma Medical Centre is open:***

Monday to Friday: 8:30-6pm.

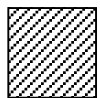
Saturday: 7:30am to 12noon.

The extended hours service is offered at Alma Medical Centre on Saturday mornings 7:30am until 12 noon.



**Action Plan**

Action / Activity	Lead	Apr-12	May-12	Jun-12	Jul-12	Aug-12	Sep-12	Oct-12	Nov-12	Dec-12	Jan-13	Feb-13	Mar-13
Further encouragement to patients to join and participate in PRG and / or PPG	Project Co-ordinator / Practice Manager / GP's												
PPG Survey	Project Co-ordinator												
PPG Newsletter	Project Co-ordinator												
Contact PRG Members regarding survey results	Project Co-ordinator												
Review PRG Feedback / Proposals	Project Co-ordinator / Practice Manager / GP's												
Provide more information regarding services, campaigns or changes in the NHS	Project Co-ordinator / Practice Manager												
Review PRG feedback forms issued in February 2012.	Project Co-ordinator / Practice Manager / GP's												
Issue Revised Action Plan to PRG and agree upon action	Project Co-ordinator / Practice Manager / GP's												



= Action Taking Place

**ALMA MEDICAL CENTRE  
ENGAGEMENT POLICY**

**Alma Medical Centre  
Patient Participation Group**

*Promoting Health in Stockton-on-Tees*

Alma Medical Centre

Engagement Policy

for the

Patient Participation Group and Patient  
Representative Group

October 2011

# ALMA MEDICAL CENTRE ENGAGEMENT POLICY

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# ALMA MEDICAL CENTRE ENGAGEMENT POLICY

## 1. Alma Medical Centre

Alma Medical Centre (AMC) is a modern family General Practice based in central Stockton providing quality family healthcare for patients in Stockton and the surrounding areas.

We offer a comprehensive range of General Practice services and also provide clinics to help you manage any long term conditions you may have.

The Patient Participation Group (PPG) and Patient Representative Group (PRG) are being established to engage patients of AMC regarding their views and opinions.

### 1.1. Patient Participation Group

The PPG aims to provide patients registered with the practice, the opportunity to be involved with the development of their GP Practice. Patients will be encouraged to 'add their voice' to the identification of new clinical service development and how such new services will be provided.

### 1.2. Patient Representative Group

The PRG will be consulted on a more regular basis and will be invited to review and provide feedback on the AMC development plan, as a representative of all AMC registered patients.

The PRG consists entirely of AMC patients. All PRG members will be encouraged to be active members of the Patient Participation Group.

## 2. The Key Objectives

The key objectives identified by the Manager and Patient Participation Project Co-ordinator are:

- **A Practice Development Plan that comprises consideration of patient views and opinions.**
- **Improved Communication between AMC and AMC patients.**
- **More knowledgeable patients regarding the services available to and provided for AMC patients and how to access them.**

### What are our Key Priorities?

The practice has also agreed that two key priorities are central to achieving effective engagement. These underpin the strategy and give clarity and direction to both our staff and service users:

**Focus resources on creative engagement of the seldom heard** - Focusing fixed resources on engaging the population that are seldom heard will help us to develop and shape the services required to improve the health inequalities across Stockton and the surrounding areas. The strategy aims to improve communication with the local community and service users so that they are engaged in the commissioning process with the North Tees GP Commissioning Consortia via Practice engagement at GPCC Board level. This is especially important in gaining the views of those groups that are seldom heard, where services may be inappropriate and therefore not accessed. This strategy will include feedback from patients who engage with the PPG and PRG.

# ALMA MEDICAL CENTRE

## ENGAGEMENT POLICY

**Have patient involvement in the development, purchase of appropriate services, and monitor of their effectiveness** – Lay involvement is crucial to the development of services and therefore the Practice will ensure that patients views will be included to form part of the strategic procurement cycle.

### 3. Engagement methods, structures and systems

#### 3.1. Engagement Methods

Three main considerations have been assessed in deciding the most appropriate methods to obtain a representative opinion and view of AMC patients:

- Timescales, Access and Communication (of both patients and AMC employees)
- Technology
- Achievement of Key Objectives

#### **Timescales, Access and Communication**

The PPG will be asked to complete a five question survey bi-monthly starting in November 2011. Each survey will have a specific theme. In each month where no survey takes place, the data from the most recent survey will be collated, verified and reported to the AMC management.

These timescales will enable AMC management to review and update its Development Plan

The PRG will be consulted on a more regular basis and will have the opportunity to review and provide feedback on the AMC action plan, as a representative of all AMC registered patients. The action plan, resulting from the Practice Development Plan, will be reviewed and implemented by the Patient Representative Group.

#### **Technology**

The Patient Participation Group (PPG) and Patient Representative Group (PRG) are both virtual groups. The reason for this is to enable all patients to participate, rather than just ones that visit either surgery within the duration of the patient engagement period. However, hard-copies of all communications and surveys will be available from either surgery to enable participation for those who do not have access to, or feel confident using, a computer or the internet.

Virtual Groups, with hard-copy available, enables patients to participate as part of the PPG and / or PRG in their own time, by their preferred method, in their chosen environment.

### 4. Achieving our Key Objectives

The practice have engaged the services of a project co-ordinator to achieve, a clear and precise vision, accessibility, current information updates, timely input and easy access for patients views.

# ALMA MEDICAL CENTRE ENGAGEMENT POLICY

## 5. Roles and Responsibilities

### **Partners**

To commit to the principles of patient participation and to consider practice development in the context of patient views and opinions

### **Practice Manager**

To work with all parties involved with Patient Participation including, Patients, Patient Participation Project Co-ordinator, practice staff and to represent patient views and opinions at North Tees GP Commissioning Consortia Board meetings.

### **Project Co-ordinator**

The Project Co-ordinator is responsible for liaising with the Practice Manager, Patient Representative Group and Patient Participation Group regarding the creation and completion of the bi-monthly surveys.

The Project Co-ordinator is also responsible for collating the data from each survey and reporting the results appropriately.

### **Patient Representative Group**

The Patient Representative Group are responsible for reviewing the AMC Development Plan. For engagement in the principles of participation groups and to voice their views in a fair and inclusive way that represents the all patients registered with both AMC and the wider communities of Stockton.

### **Patient Participation Group**

The Patient Participation Group are responsible for providing feedback through surveys on a bi-monthly basis.

### **Staff**

All staff members have a role and personal responsibility for patient engagement. This includes the provision of information and the promotion of patient involvement / engagement.

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