

Sheepcot Medical Centre

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PATIENT PARTICIPATION GROUP REPORT

MARCH 2014

1. Establish a PPG comprising of Registered Patients and use best Endeavours to ensure the PPG is representative.

There are **10444** patients registered at the practice (Mar 2014). The age ratio is **50.89 % females and 49.10 % males.**

We continue to have a high ratio of 0-40 year old patients, but with an aging population, a significant number of our patients are within the age of 40-69 years of age. We do not expect this trend to alter.

We have been collecting ethnicity data for many years. Historically the majority of our patients have been Caucasian, but we now have an increasing numbers of Eastern European, African, Asian, Caribbean and Mixed Race ethnicities. The percentage of these patients is relatively small – 9.7 %, but is increasing year on year.

With an ageing practice population, the number of patients with long term conditions has by default increased too. This presents additional challenges to all clinicians within the practice, particularly at present as the Community Nursing support is significantly reduced due to staffing problems. Patients when circumstances require it are supported by our Practice Nursing team, as well as the Doctors, to reduce the potential of them requiring acute admission to WHHT.

We have traditionally been a 'family practice' and many of our patients have the benefit of a long term 'doctor /patient' relationship, spanning many years.

After the initial few meetings in 2012/13, it was agreed that the size of the original patients needed to be reduced to make it more manageable. The Patient Participation Group (PPG) currently comprises of 14 'core' patients.

The ethnicity of the group is 13 Caucasian and 1 of mixed Asian type. The age ranges of the group varies from 39 to 74. Their breakdown is demography is 6 male and 8 female. This we feel is a fair & reasonable representation of the practice population.

The ethnic and demographic structure of the group currently comprises of 50% split of males to females, all of whom were of Caucasian ethnicity. The lower age was 49 and the upper 87. We have found it difficult to recruit younger members and also those of different ethnicities. The group currently is representative of several interest groups including carers, those with specific chronic diseases, those without long term medical conditions and those that are either still in full/part time employment, or retired.

We continue to advertise and promote the PPG throughout the surgery. This has had the effect that a few new patients have recently come forward to support the current members. We would like to encourage younger patient cohorts and will be re-visiting the exercise initially completed in September of texting all patients between the ages of 18 and 35, to encourage them to register an interest in joining or participating in the group.

The PPG is considered to be an evolving group, rather than a fixed one. The Practice therefore continues to promote the PPG and would be very happy to receive further expressions of interest to join the group, from all ages, ethnic cultures and backgrounds, so that the PPG becomes more representative of all the practice populations.

The PPG will soon have a dedicated email address which will be promoted on the practice's website - <http://www.sheepcotmedicalcentre.co.uk/> which will be an alternative way of contacting the practice or group members of the PPG.

2. Agree with PPG which issues are a Priority and include these in the local Survey

The PPG has met regularly on 3rd September, 7th October, 18th November, 3rd 2013 February & 3rd March 2014. During the meetings held in 2013, the priorities the group should focus on were discussed, and the conclusions below support the topics that were covered in this year's Patient Survey. The final conclusions of the PPG agreed the following priorities should be:

- To promote opportunities to use Emis Access, on line advance appointment bookings & prescription requests
- Were patients aware of alternative access (other than face to face consultations) to GP/PN's ?
- To advertise the text reminder service which is available /sent to patients mobile phones
- To improve communication, by improving the Health Promotional presentations on the plasma screen in the waiting room.
- Greater awareness of OOH services to patients, rather than attend A&E depts.
- To support the practice's plans to re-location during 2014.

3. Collate Patient Views through the Patient Survey and Inform PPG of its findings

- The main area the group felt needed to be improved was practice communication. There were patients who weren't aware of the facilities available via the website to request prescriptions and make appointments (EMIS Access)
- The text reminder service, all thought had huge benefits, but was limiting, as the practice database didn't currently have all patients mobile phone numbers recorded. It was agreed that a greater awareness of the service needed to be promoted, as well as an insight gained into how many patients were currently aware of the service and to obtain patients mobile phone numbers when they attend the surgery.
- Extending the types of text messaging /reminders to patients, to encompass annual checks, cervical smears, influenza vaccinations etc.
- Promoting the services of the local Pharmacists, to reduce the pressures on the Drs and Practice Nurse appointments for minor illness / ailments
- Awareness of the triage / phone consultations available each day with either a Dr or Practice Nurse, to reduce the demands on urgent face to face appointments

It was agreed that until the practice were in a position to fully guarantee the surgery re-location would take place, this topic would not be included in the patient survey.

The survey was conducted during the period of January & February '14. All patients with an email addresses recorded on their medical records, were emailed a link to the survey, requesting they complete it by the 1st week of February. Each clinician had paper copies of the survey, which they distributed to patients during the same period of time. These were completed before they left the surgery, and placed in a box at front reception.

The number of responders was 243 patients. Each question was answered by at least 93 % of total patients completing the survey. The ethnicity recorded for responders also is reflective of the practice database profile. Therefore based on these results, the practice feels that this 'provides the confidence that the reported outcomes are valid'

Web Site Address for Published Report:

www.sheepcotmedicalcentre.co.uk - please see Patient Participation Page

4 & 5 - Provide the PPG the Opportunity to comment and discuss the findings of the Survey. Agree an action plan of priorities with the PPG

The first meeting following the completion of the survey, took place on 3rd March 14. Copies of the results were available at the meeting, and individually discussed. The following agreements were confirmed

- Practice Manager and Reception Manager will continue to liaise with EMIS (clinical IT system) regarding the improvements required to make the Access software more user friendly when patients initially register and use for the first time
- The practice will roll out additional software accessed by the phone system, which will enable all patients the option of making, cancelling and checking the times of their appointments
- A box will be located by the patient appointment check in screen, with information about both of the above options
- All patients' email addresses will continue to be obtained and added to their medical records
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Other Priorities also Agreed :

At previous meetings' a patient 'Newsletter' was agreed would be published. It was felt by all the group members that patients needed to be informed of the progress and outcomes of the PPG. A draft was emailed prior to the meeting. This would not only support all of the above bullet points but also news about the surgery re-location, and how they as a group could actively overcome patients concerns about the move. A copy of this draft document is also provided to support the ongoing progress and future 'agendas' the PPG is actively working on.

Communicate via local magazines ' My Garston, Abbots Langley, Watford, Bricket wood ' and local estates residents newsletters – following confirmation that the practice will be re-locating by 31 12 2014.

Once the legal documents have been signed, the newsletter & article for the magazines will be posted on the website and copies left in the waiting room and front reception desk for patients.

PPG members will during the summer months, volunteer to set up information stands in the waiting room, where they will be on hand to seek and address any concerns patients may have about the re-location. Until such point that we can ascertain the degree of anxiety patients may have, it was agreed that any discussions with Arriva (bus company) to divert bus routes to the site of the new surgery, would be deferred.

Local taxi companies would be contacted to ascertain whether they would be receptive to having a fixed price rate for patients who may find it difficult to get to the new surgery.

2 representatives of the PPG recently attended a 'Planned and Primary Care Café' event at Stanborough SDA Church. They provided the group with feedback and were very positive about areas of health promotion, and felt that this information could be included in future newsletters, so the health promotion 'messages' could easily be circulated to a wider audience.

Sheepcot Medical Centre Opening Times March 2014

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| Monday | 08:00 to 18:30 |
| Alt Monday | 18:30 to 19:30 |
| Tuesday | 08:00 to 18:30 |
| Wednesday | 08:00 to 18:30 |
| Alt Wednesday | 07:00 to 08:00 |
| Thursday | 08:00 to 18:30 |
| Friday | 08:00 to 18:30 |
| Alt Saturday | 08:00 to 10:00 |