

Dr Smith & Taylor  
Victoria Medical Centre

Patient Reference Group Report  
March 2012

A synopsis of the Patient Reference Group Report 2011– 2012. This report will summarise the background and development of the group and the outcomes of the patient survey.

The subsequent areas will be described in full.

- **The Practice Population Profile**
- **The Profile of the Group**
- **The Rationale of the Group**
- **The Methodology of the Survey**
- **The Results of the Survey**
- **The Expectations of the Group**
- **The Formation and Structure of the Virtual Group**
- **The Future of the Patient Reference Group(PRG)**

This report will outline the patient reference survey.

The PRG are planning further surveys (see section, *the future of the patient reference group*). This will result in a report that will be published in March 2013.

### The Practice Population Profile

To date: the practice total is 9013 the practice population constantly increases and over the past 12 months there has been an increase of 500 patients moving onto the list.

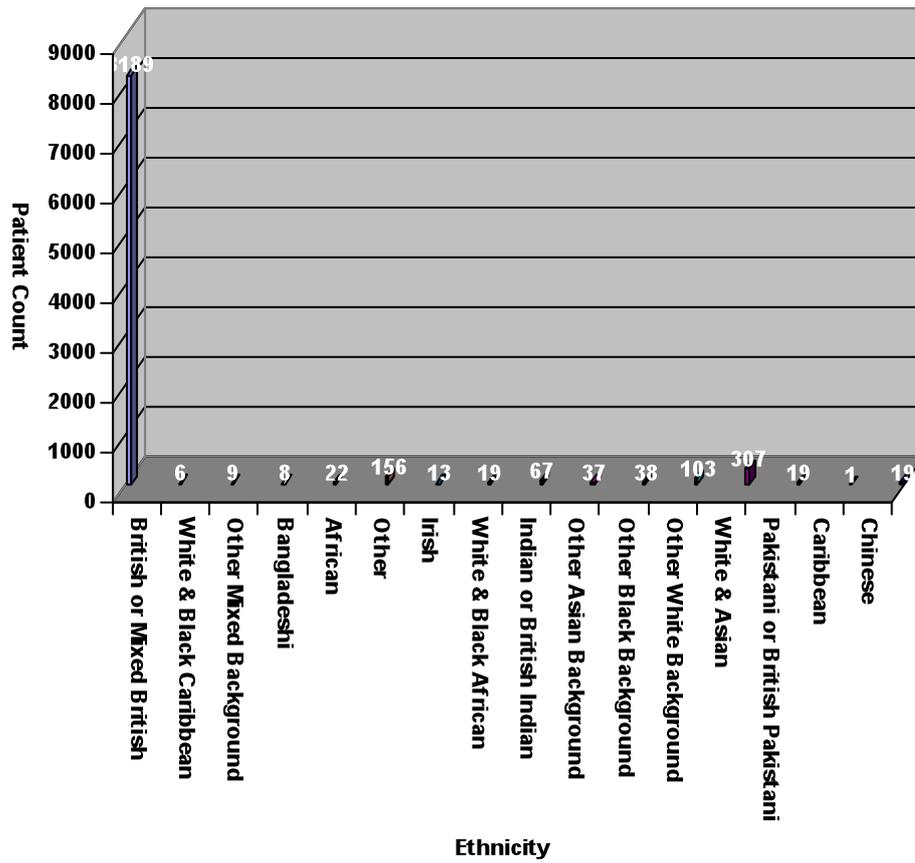
### Age/Sex Profile

Parent Population: All regular patients currently registered at the practice.

<u>PATIENT COUNT</u>	<u>MALES</u>	<u>FEMALES</u>
9013	4290	4723

Ethnicity data is recorded in 98% of all patients currently registered at the practice.

Ethnicity Profile



(graph 1)

The Profile of the Patient Reference Group

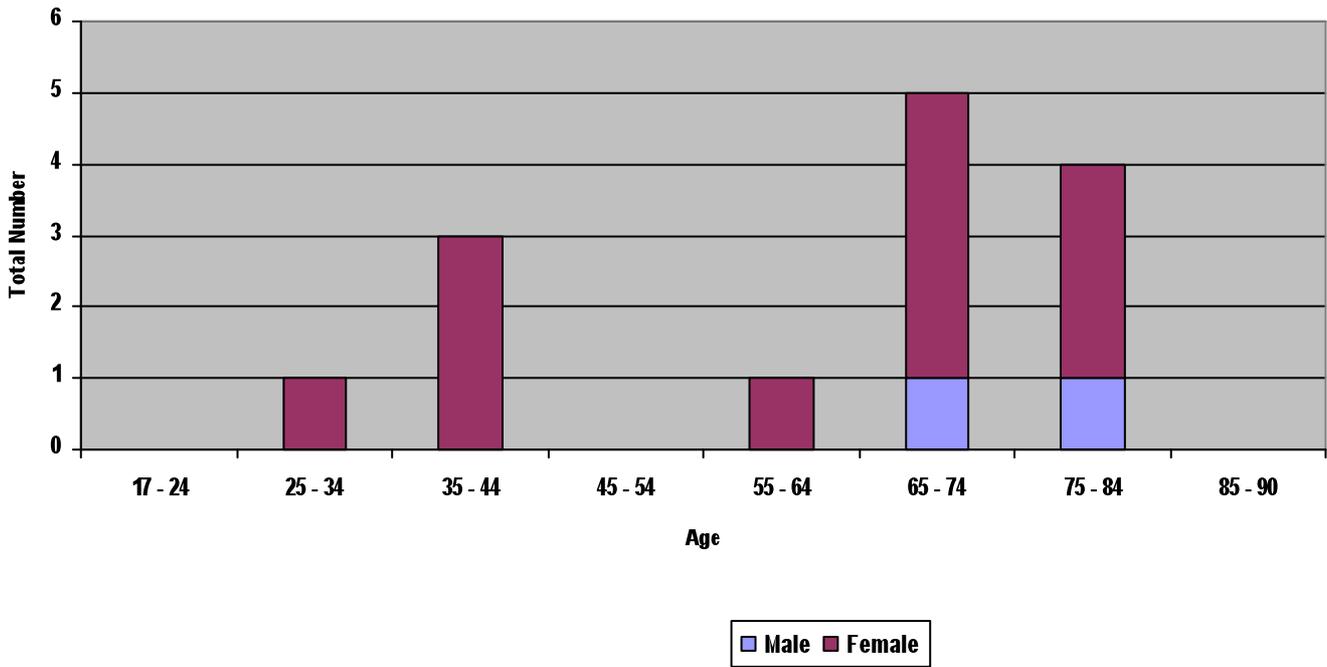
There are currently 12 members serving on the PRG. See graph for the breakdown of age/sex profile. Also in attendance is a GP and a Practice Manager.

Male/Female Profile Count

MALE	FEMALE
2	10

The members of the group are 100% white British

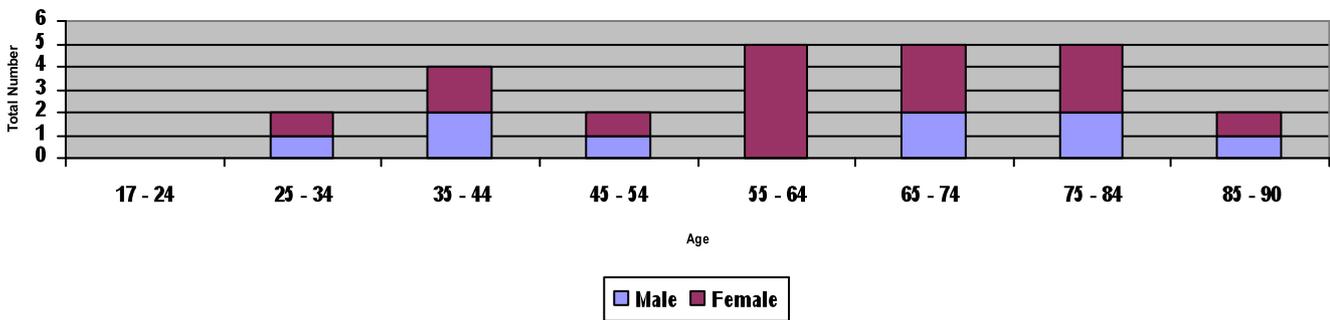
**Patient Age Profile - Patient Reference Group**



(graph 2)

**The Sex/Age Range Profile of the Virtual Group**

**Patient Age Profile - Virtual Patient Group**



(graph 3)

The group was established after extensive advertising within the practice. The practice advertised in the following areas.

- In house with posters, displays and advertising in the waiting room areas. along with inviting patients via the electronic notice boards
- On the practice website
- Practice newsletter
- Asking attached staff, i.e. midwives, health visitors, substance misuse workers, mental health workers, to encourage patients to be part of the group
- The practice staff speaking to patients, this included the practice nurses and the doctors. Secretaries at the 'choose and book' reception window.
- Leaflets and Handouts and on prescriptions
- Letters posted out to patients inviting them to join the group

The practice wanted to extend and increase the numbers of the reference group, with both a more varied age range, increased male/female ratio as well as an inclusion of patients in diverse groups. After widespread promotion of the group, with only a small number who were willing to be part of the PRG, the practice decided to advertise for patients who perhaps couldn't afford the time

to commit to attending meetings, but who were enthusiastic at being part of a 'virtual group' The practice set about advertising for the virtual group in all the same ways as indicated above. (See the results and data graph 3). This group continues to grow, with patients being signed up daily.

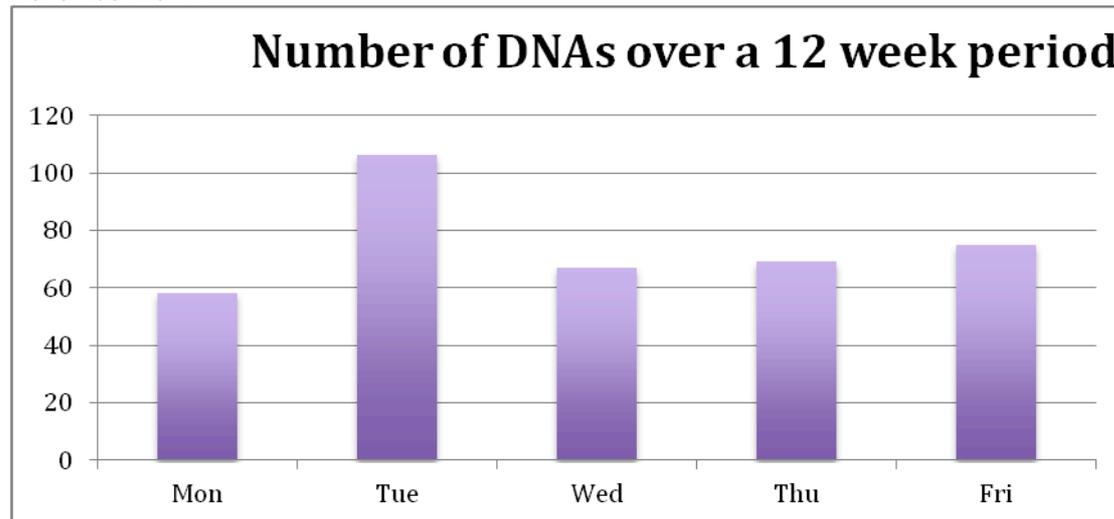
The practice will continue to encourage patients from all age ranges and diverse backgrounds to be part of the PRG or the virtual group.

### The Rationale of the PRG

The rationale of the group was to involve patients: The practice wanted to improve our services and the patient experience. Evidence shows that the way to get the full cross section of opinion is by surveying patients, in particular 'in house surveys' and to assess specific areas of services and to determine areas where if any improvements could be made, the practice needed the assistance from our PRG. The group met and after discussions they looked at an area of concern which was access and appointments. The group agreed to look at patients who booked appointments and failed to attend, this group of patients are referred to as *Did Not Attend* or *DNA*. An audit of data was requested and Dr A Littlewood (one of salaried doctors in the practice) collated this information on behalf of the group (see graph 4)

### DNA Audit

To determine the extent of the problem, I looked at the GP appointments over a 12 week period, from 5<sup>th</sup> September to 25<sup>th</sup> November 2011.

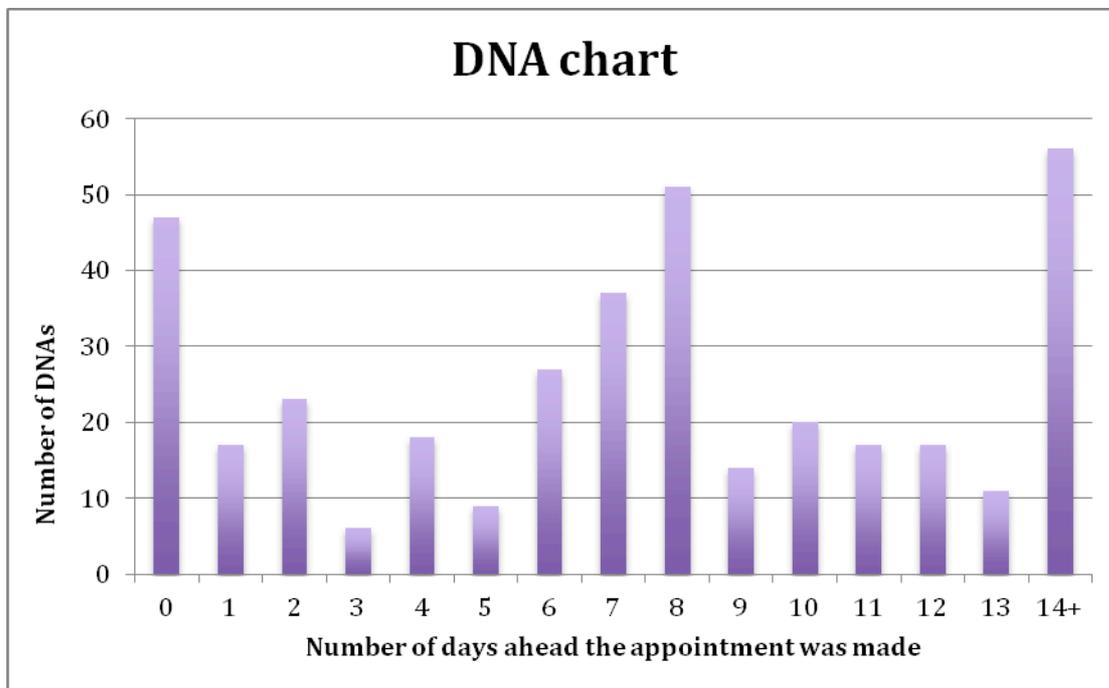


(graph 4)

There are many reasons why a patient makes an appointment to see their GP and their perception of how quickly they need to be seen also varies widely.

Other constraints, for example, work, children, transport etc, also need to be taken into consideration. A balance has to be found so that appointments can be provided for acute illness as well as less acute and chronic or routine care. There seem to be a lot of patients failing to attend their appointments. There were DNAs every day, ranging from just one to sixteen in one day. Patient numbers were plotted and the results in a bar chart:

I then looked at the DNA'd appointments themselves to see if the length of time that the appointment had been booked was a factor. I plotted these results on another bar chart:



I expected the numbers to increase with the number of days ahead that the appointment had been prebooked, but this was not the case. Of some concern, is the high numbers of patients failing to attend when they had made the appointment the same day. Numbers also peak at one week. The lowest DNA rate was seen with patients prebooking by 3 days ahead.

The group met to analyse this data. The group asked for a further breakdown of data into the following categories.

- Male/Female
- Age categories
- Ethnicity

#### **Further information collected from patients who have DNA'd appointments at Victoria Medical Centre**

189 patients did not attend in a one month period  
Of which:

62 Males were White British                      9 of other ethnic groups  
108 Females were White British                10 of other ethnic groups

These were in the age range categories

	MALE	FEMALE
0 – 15 years	22	14
16 – 21 years	4	17
22 – 35 years	12	44
36 – 50 years	16	23
51 – 65 years	10	10
66 – 75 years	6	8
76 and over	1	2

## METHODOLOGY

All of the above data formed the basis of the patient survey. The group met again to design a patient questionnaire. The consensus of which was a concise questionnaire that a patient could complete, whether in the surgery or take home (SAE envelopes were provided on request) also patients who had previously offered their email address and a willingness to take part in the survey were emailed the questionnaire.

The practice had carried out an audit on patients who did not attend their booked appointment. Over a 3 month period, 360 patients did not attend or cancel their appointment in this period. The practice also categorised these figures into age and gender. The group's decision was to survey patients to establish whether there were areas for improvement within accessing the surgery. The group were informed that changes had already been made within the practice around emergency access. A cancellation line and a second telephonist were implemented to assist in patients accessing the practice resulting in a shorter waiting time, in getting through on the telephone.

The group agreed on a format of questions to ask the patients. We were able to help the group with this as the practice have a 3 year experience of running 'in house' questionnaires, on various aspects, both clinical and on the patient service, and care. The Group also consulted the guidance contained in the NHS employers Guidance 'Patient Participation Direct Enhanced Service (DES) for the GMS contract'.



## METHODOLOGY

Having looked at existing validated patient surveys i.e. NAPP website. Along with the CFEP. Our inspiration came from our experience and success of own generic 'in house' surveys and questionnaires that the practice have been using over the past 3 years. After discussion with the group, the decision was to design and produce our own, tailored to our own practice requirements.

### ESTIMATED FOOTFALL

The group were given an estimate of how many patients would come into surgery, on a weekly basis. The figure was 1466 per week. The group agreed that if staff were to canvas all patients coming into practice whether for an appointment or other reason they should be asked to complete a questionnaire. The group agreed that by carrying out the survey this way, it was a fantastic opportunity to reach a large diverse group of patients, and obtain their views.

The survey was carried out and staff were instructed to hand the questionnaire to **ALL** patients coming into the surgery, whether they were calling in for their appointment or if they were collecting a prescription. It ran from Monday to Friday, over a 2 week period. The Virtual groups and patients who wanted to complete online were also emailed the survey. During this time the surgery was running not only routine appointments, but additional services such as, antenatal, mother and baby, mental health, smoking cessation, chronic disease clinics. Running the survey at this time the group saw as an opportunity to engage with as many patients as possible and to establish their views.

The following results and outcomes were discussed with the PRG. This gave the group the opportunity to reach agreement of changes in provision and manner of the delivery of services.

## RESULTS & OUTCOMES

### PATIENT REFERENCE GROUP RESULTS FROM THE PATIENT SURVEY FEBRUARY 2012

\* note the data in bold are responses from our 'virtual group'.

<u>Question One</u>	A (phone)	B (in person)	C (internet)	SPOILT QUESTIONNAIRES
How do you usually make your appointment	62 <b>(2)</b>	34	14 <b>(18)</b>	
<u>Question Two</u> Did you know we had internet access	YES 82 <b>(20)</b>	NO 28		
<u>Question Three</u> Did you know we have a cancellation line	YES 90 <b>(3)</b>	NO 20 <b>(17)</b>		
<u>Question Four</u> Made an appointment and not cancelled	YES 4	NO 101 <b>(20)</b>		5 - 1 'don't think so' & 1 'unsure' 3 no answer given
<u>Question Five</u> Reason for not cancelling	2 COMPLETED THIS SECTION 1 - 'I forgot' 2 'I forgot about it and missed it'			
<u>Question Six</u>	YES	NO		

Would you like a reminder	71 (1)	36 (19)		3
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## OUTCOMES

**Question one.** (We were surprised at how many were in person.)

- To have another push on advertising and encouraging patients to register for the internet, for booking of appointments and ordering medication, there by freeing up the phone lines for those without internet access.
- Changes to the appointment card to advertise the option of internet access (including ordering of prescriptions.)

**Question two.**

- Look at **other** areas where/how we could advertise the internet and the benefits of it. i.e. handouts for every patient coming into practice , another poster campaign – should we look into other places such as chemists, post office, libraries to establish if they could display the posters

**Question three**

- Recent research states that if the patient is encouraged to write the appointment down for themselves on the appointment card – or if telephoning, the telephonist asking the patient to write it down. They are far more likely to remember the appointment. The group thought this would be a good idea and staff to carry out this method and request the patient does so. Then a plan to monitor to see if this has been effective and to see if this theory does work in our practice, a re run of the DNA audit would establish this.
- The group also decided to make a change to the appointment card to add more information regarding the importance of either keeping an appointment or using the cancellation line. Reinforce how much of the doctors/nurses time is wasted and other patients cannot access the services available, due to patients not cancelling their appointment

**Question four**

- The response to our survey does not seem to reflect how many DNA's we have. Maybe the patients who completed the survey aren't the ones who DNA. Or perhaps did not want to admit that this was the case for them. The group suggested continuing with the information available on the patient electronic board stating how many per month did not attend.

**Question five**

Few chose to make a comment some of the comments collected were

- 'a waste of money to remind people'
- 'receptionists should point out how many times you've DNA'd'
- 'remind me by email would be good'
- 'didn't know about the internet'
- 'always come in person as I live nearby'
- 'staff should ask for the appointment card'

**Question six**

- The practice plan to discuss SMS Text messaging further with our computer people (EMIS) regarding confidentiality issues around sending messages to patients

## CHANGES AND PROVISION AGREED BY THE PRG

- The practice should hold a further in house advertising campaign to encourage patients to register for the internet. Advertise that registering on the internet enables patients to not only book an appointment but they can order their medication, and change details. Underline the importance of how this frees up the telephone lines enabling non internet users the ability to contact the surgery. Underline the importance of freeing up the telephone lines to enable urgent and emergency calls to contact the surgery.

- Design a new appointment card to advertise the internet, featuring all the above reasons for registering on the internet.
- Look into other areas of where and how we can advertise the internet and its benefits. Suggestions from the group were. Libraries, Post Offices, Chemist, Mother & Toddler Group, Local places of Worship, Weight Wise, Weight Watchers, and Slimming World, Community Halls.
- Staff to change how they give out an appointment. As research states '*if YOU write it down you wont forget it*' Create an 'in house slogan, or logo' and advertise this in as many places as the practice could. The suggestion which came from the group was '*BOOK IT AND KEEP IT*'
- Appointment cards to hold more information, regarding the cancellation line. Reinforce how many DNA's affect the time wasted by doctors and nurses
- Continue with the DNA information posted around the practice. Suggestions from the group included, on prescription 'B' sides. In the practice leaflets and on the electronic notice boards. And on the website.

## ACTION PLAN, PRIORITIES AND PROPOSALS

### RED

Advertising campaign, ' Register for internet access.'

Plan the next PRG meeting to discuss outcomes from the DNA audit

To expand the group. Encouraging a wider, diverse section of the practice population.

### AMBER

Design more than one appointment card to advertise the internet. Group to choose which we launch

### GREEN

Re audit the DNA stats. The group to discuss the stats from the re audit at the next meeting

## The Future of the PRG

Future planning further meetings are planned. The next stage for the group: a paramount step will be to encourage and invite a wider diverse section of the practice population to take an active role in the PRG. The next survey will be based on the access to the practice in person, what facilities do we have, and what areas can we improve on. The group want to look at access and the public areas from another's perspective, i.e parents with prams, wheelchair users, the hearing and sight impaired along side those who drive or use a bike or arrive on foot. Whether comfort is an important factor, or the waiting time. The group will look at data available on Equality and Diversity and supporting patients on the journey when visiting the surgery.

Dr Taylor & Denise Morley

On behalf of the Patient Reference Group

**Please see Practice Leaflet below that contains the opening hours including extended hours and the method of obtaining access to services throughout the core hours at the Practice.**

# VICTORIA MEDICAL CENTRE

7 Victoria Crescent West  
Barnsley  
South Yorkshire  
S75 2AE



## Practice Information Leaflet



**Telephone 01226 282758**

### Opening hours

<b>Monday</b>	<b>8:00am - 8:30pm</b>
<b>Tuesday</b>	<b>8:00am - 8:30pm</b>
<b>Wednesday</b>	<b>8:00am - 6:30pm</b>
<b>Thursday</b>	<b>8:00am - 6:30pm</b>
<b>Friday</b>	<b>8:00am - 6:30pm</b>

Saturdays, Sundays and public holidays the surgery is closed.

**Outside surgery hours call  
01226 282758**

The surgery provides ample car parking, access without steps and all on one level, wheelchairs and wheelchair access. There is a confidential room near reception if extra privacy is needed



[www.victoriamedicalcentre.org.uk](http://www.victoriamedicalcentre.org.uk)

## PRACTICE TEAM

### Practice Doctors

<b>Dr Mark T Smith (Partner)</b> Special interests: Diabetes, minor surgery, cryotherapy, joint injections, GP Registrar trainer, Commissioning board member for BCC, drug & alcohol lead GP	Male	MBChb Manchester 1985	MRCGP
<b>Dr Claire M Taylor (Partner)</b> Special interests: Contraceptive Implants (Coil fits/Implanon), medical student trainer, baby clinic lead GP, joint injections, cryotherapy, patient participation group chair	Female	MBChB Leeds 1991	MRCGP, DFFP
<b>Dr Morven Lowe</b> Special interests: Injections, cryotherapy	Female	MBChB Sheffield 2002	MRCGP
<b>Dr E Travers</b> Special interests: Cryotherapy	Female	MBChB Sheffield 2004	MRCGP
<b>Dr Adrienne Littlewood</b> Special interests: contraceptive implants (coil fits/Implanon)	Female	MBChB Sheffield 1993	DFFP

### Practice Staff

<b>Debbie Dyson</b>	<b>Practice Nurse</b>
<b>Kerena Mann</b>	<b>Practice Nurse</b>
<b>Bev Grimshaw</b>	<b>Healthcare Assistant</b>
<b>Sue Govier</b>	<b>Phlebotomist</b>

<b>Denise Morley</b>	<b>Practice Manager</b>	<b>Tel: 01226 729806</b>
<b>Kate Appleyard</b>	<b>Practice Administrator</b>	<b>Tel: 01226 729808</b>

**Surgery fax number 01226 729800**

**Website: [www.victoriamedicalcentre.org.uk](http://www.victoriamedicalcentre.org.uk)**

**NHS choices website: [www.nhs.uk](http://www.nhs.uk)**



**Victoria Medical Centre has recently been awarded the Barnsley Quality Practice Award.**

## Services available

### **Chronic disease management**

- Chronic Heart Disease Clinic
- Diabetic Clinic
- Asthma Clinic
- COPD Clinic
- Stop Smoking Advice
- Well woman & cervical smears
- Ante natal (Wednesday 9:00am - 11:00am)
- Postnatal appointments
- Well baby checks and immunisations
- Minor operations : Weekly
- Well person and NHS checks
- Travel Advice & travel vaccination appointments
- INR (Warfarin) Clinic
- Family planning advice including Implanon and IUCD
- Psychological Therapies
- Welfare rights
- Drug and alcohol advice
- End of life care

### **APPOINTMENTS**

<b>Monday</b>	<b>8:00am - 11:40am</b>	<b>3:30pm - 8:30pm</b>
<b>Tuesday</b>	<b>8:00am - 11:40am</b>	<b>3:30pm - 8:30pm</b>
<b>Wednesday</b>	<b>8:00am - 11:40am</b>	<b>3:25pm - 6:30pm</b>
<b>Thursday</b>	<b>8:00am - 11:20am</b>	<b>1:40pm - 6:30pm</b>
<b>Friday</b>	<b>8:00am - 11:50am</b>	<b>2:30pm - 6:30pm</b>

**The surgery is closed Saturdays, Sundays & public holidays.**

**We normally close the last Wednesday afternoon in the month between 12:30pm and 4:00pm for training.**

## Appointments

### **All surgeries are by appointment only.**

These can be requested by phoning the surgery on 01226 282758, by the internet or in person. You may consult with any doctor, depending on availability, not necessarily the one you are registered with. However, to aid continuity of care we ask that you try to see the same doctor for follow up of any particular episode of illness. Please specify the doctor you wish to see when making the appointment.

Urgent cases are always seen the same day, but not necessarily with the doctor of your choice.

If you feel you cannot wait until the next available routine appointment to be seen you will be offered a 'same day appointment'. This appointment is for one problem only. Due to the unpredictable nature and often high demand for these appointments you may have a wait to be seen. Patients with complicated problems may then be asked by the doctor to rebook a routine appointment.

If you cannot keep an appointment, please let us know so that it can be offered to someone else. We now have a dedicated cancellation line which can be reached by phoning the surgery on 01226 282758 and selecting option 1.

Health Visitors and Midwives attend some of our clinics and can be contacted by the receptionist on your behalf.

We also have a team of friendly receptionists who are available when the surgery is open to try and answer your queries. Please remember they are attempting to perform the nearly impossible task of keeping both doctors and patients happy.

## Telephone advice

Is offered to patients, if appropriate. Patients are able to have access to the duty doctor each day. If appropriate nurses can also be contacted this way.

## Home visits

If a patient is too ill to travel to surgery a doctor will visit if they consider it appropriate. Visits are normally for genuinely housebound and would not normally be necessary for children. If possible please request before 10:00 am. You will be asked why the visit is necessary so that doctor can judge the urgency of the call.

### Internet access & online facilities

We have our own surgery website (new website currently under construction)

You can use this to book appointments, order prescriptions & change your registration details.

Please ask a member of staff for your log on/password details.

### Test results

Please ring for test results after 2:00pm if at all possible. The phone lines tend to be less busy at this time and also that day's hospital post will have been received in practice and dealt with. Results will only be given to the patient unless prior written authorisation has been given to disclose to a third party.

### Out of hours

For advice or home visit request, telephone the surgery as usual. You will be transferred to Care UK which is the Doctor Deputising Service and provides cover for many practices in the area. Phone calls are recorded by the Deputising Service. They are answered in order and there may be a short delay at busy times. You may be offered advice, a consultation or a home visit. Please reserve out of hours requests for genuine emergencies. Our out of hours service (Care UK) is commissioned by the PCT. NHS Direct is also available 24 hours a day, 365 days a year and can be contacted by telephoning 0845 46 47 or via their website [www.nhsdirect.nhs.uk](http://www.nhsdirect.nhs.uk).

### Repeat Prescriptions

If regular treatment is required, the doctor will authorise issues of repeat prescriptions of specified medications, usually for four weeks supply at a time. You will be asked to see the doctor or nurse at regular intervals for review of treatments. Please allow 48 hours for collection of your prescription (excluding weekends/bank/local holidays). Medication can also be ordered via the internet. In extreme circumstances eg you have totally run out of your medication, we will endeavour to get you a prescription ready the same day. Telephone requests for medication will not usually be dealt with.

### Access/car park

The surgery has a car park next to the building. Wheelchairs are available in the waiting room. Please inform the receptionist if you have any special requirements. There is a confidential room near reception if extra privacy is needed. A toilet for the disabled is available.

### Complaints/suggestions

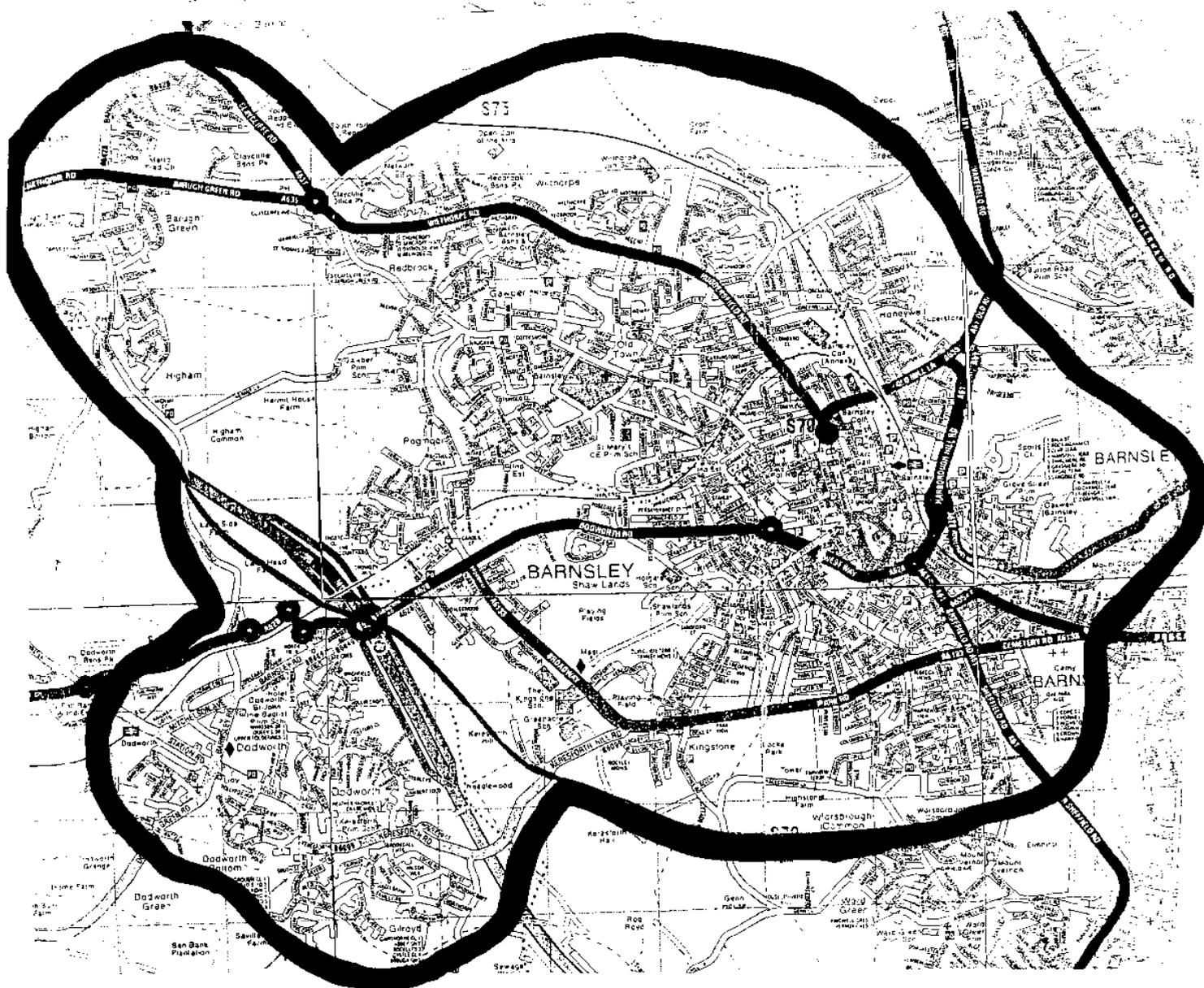
If you have any specific complaints about our service these should be made initially to the Practice Manager and reception staff will advise you about how to do this. We will do our best to resolve complaints as quickly as possible through our complaints procedure. A leaflet about our procedure is available at the reception desk. There is a suggestion box in reception.

## How to register

You can register as a patient with the practice either by completing a registration form from reception or by bringing in your NHS medical card.

You will be asked to complete a simple questionnaire. This provides us with important information about your health. Newly registered patients are also encouraged to attend for a health check (usually with our health care assistant) in order to assess any current or future needs and to introduce our services.

## Practice area



Please ask at reception for further details.

## Training

The practice is involved in the training of medical students. This will mean that sometimes another person will be "sitting in" with your doctor. You will be warned in advance when this is happening and you will have the opportunity to decline if you prefer. The practice also trains GP registrars who are fully qualified doctors completing their training in General Practice. Sometimes they will be "sitting in" with your doctor but more often they will be taking surgeries of their own. The training GP will always be available for advice if necessary. Please see our information board for the current GP registrar. Occasionally there will be a video camera in use. You will be warned in advance when this is happening and will have the opportunity to decline if you prefer. Intimate examinations will not be recorded and the camera can be switched off at any time. The recording will be erased after use.

## Confidentiality of patient's records

Because we are a training practice we sometimes need to use patient records during official visits to check on practice quality and standards. The visit team are all subject to a strict duty of confidentiality

## Equal opportunities/Recognising diversity

The practice does not discriminate on the grounds of race, gender, age, disability or sexuality.

## Violent and abusive patients

The practice will not tolerate violent or abusive behaviour. Anyone verbally abusing either a member of staff or the public, or using inappropriate language will be asked to leave the premises and requested to find another GP. Anyone who is violent or causes damage will be removed from the practice list immediately.

This practice is contracted to:

Barnsley Primary Care Trust  
Longfields Court  
Longfields House  
Middlewoods Way  
Wharncliffe Business Park  
Carlton  
Barnsley  
S71 3GN

## Practice Patient Reference Group

Are you interested in finding out more about your surgery?

Would you like to influence development of services?

If so, please contact Denise Morley, Practice Manager or 01226 729806 or email [denise.morley@gp-c85033.nhs.uk](mailto:denise.morley@gp-c85033.nhs.uk) for further details



## Useful contact numbers

### **Hospitals**

Barnsley Hospital	01226 730000
Doncaster Royal Infirmary	01302 366666
Montagu Mexborough	01709 585171
Northern General Hospital	0114 2434343
Rotherham Hospital	01709 820000
Royal Hallamshire Hospital	0114 2711900
Sheffield Children's Hospital	0114 2717000
Weston Park Hospital	0114 2265000

**NHS direct** 0845 4647

### **Chemists**

Akrans (Monk Bretton)	01226 207020
Asda	01226 704810
Boots (town centre)	01226 282616
Boots (Worsbrough)	01226 242026
Cohens	01226 320597
Ellisons (Huddersfield Road)	01226 281666
Ellisons (Park Grove)	01226 203447
Elliot's (Spring Street)	01226 282146
Lloyds (Bus Station)	01226 289620
Lloyds (Cemetery Road)	01226 282157
Stephensons (Kexbrough)	01226 388475
Superdrug (town centre)	01226 282106
Tripharm	01226 286312