

**Dr Khokher & Partners
Queens Park Group Surgery
23c Carlisle Road
Queens Park
Bedford MK40 4HR**

March 2014

Local Patient Participation Report

This report summarises development and outcomes of Dr Khokher & Partners Patient Reference Group (PRG) in 2013/14

It contains:

1. Profile of the practice population and PRG
2. The process used to recruit to our PRG
3. The priorities for the survey and how they were agreed
4. The method and results of the Patient Survey
5. The Action Plan that was agreed and how it was agreed
6. The progress made with the action plan
7. Confirmation of our opening times

Profile of the practice population and PRG

Information checklist for local patient participation report

Show how the practice demonstrates that the PRG is representative by providing information on the practice profile:

Practice population profile	PRG profile	Difference
Age		
% under 16 25.2%	% under 16 0	0
% 16-20 6.54%	% 16-20 1%	-5.54%
% 21-30 14.72%	% 21 - 30 9.90%	-4.82%
% 31-40 33.45%	% 31 - 40 27.72%	-5.73%
% 41-50 14.36%	% 41 - 50 20.79%	6.43%

% 51- 60	9.21%	% 51 – 60	5.94%	3.27%
% 61-70	6.21%	% 61 – 70	18.81%	12.60%
% 71-80	4.49%	% 71 – 80	6.93%	2.44%
%80+	2.43%	%80+	5.94%	3.51%

White		White		
% British Group	10%	% British Group	45%	+35%
% Irish	0.08%	% Irish	0%	-0.8%
Mixed		Mixed		
% White & Black Caribbean	0.05%	% White & Black Caribbean	0.05%	-0.05%
% White & Black African	0.20%	% White & Black African	1.98%	1.78%
% White & Asian	0.36%	% White & Asian	0%	-0.36%
Asian or Asian British		Asian or Asian British		
% Indian	3.0%	% Indian	8.91%	+5.91%
% Pakistani	6.0%	% Pakistani	28.71%	+22.71%
% Bangladeshi	1.6%	% Bangladeshi	0%	-1.6%
Black or Black British		Black or Black British		
% Caribbean	0.42%	% Caribbean	0%	-0.42%
% African	1.95%	% African	3%	+1.05%
Practice population profile		PRG profile		Difference
Chinese or other ethnic Group		Chinese or other ethnic Group		

% Chinese	0%	% Chinese	0%	0%
& Any other	10%	& Any other	6.93%	-3.07%
Gender				
% Male	51%	% Male	34%	-17%
% Female	49%	% Female	66%	17%
Differences between the practice population and the members of the PRG	The practice should describe any variations between the group and the efforts that have been made to reach any groups not represented			

The practice targeted all areas where representation was difficult to attain. We did this by advertising in the surgery and also by asking patients when they attended the surgery if they needed help completing the questionnaire. Some of our patients are unable to write in their own language and they were asked if they required an interpreting service to help them. Our PPG has a fairly good representative membership of our practice population and members do help as some of them speak and write different languages. We are always advertising within the practice for new members especially targeting young people and women. We have recruited two new members this year but unfortunately they have only been able to attend one meeting.

This year we have also carried out the friends and family questionnaire, have had the consent forms and opt out forms and have found it more difficult for patients to commit to fill in the questionnaire. Often they take them home but do not return them. Women seemed more willing to fill them in than our male patients.

Patients with learning disabilities were asked (and their carer) if they wished to fill in a questionnaire when they attended for their annual check.

Members of the PPG and PRG were sent a questionnaire to fill in.

Questionnaires were available at both our Queens Park and Honeysuckle Way sites and on our website.

The process used to recruit to our PRG and PPG

In order to recruit to our PRG and PPG we:

Put up posters in practice

Offered leaflets to all patients attending practice

E-mailed patients

Put information on the practice website

Met with our Patient Participation Group (PPG) in July 2013. A newsletter is produced by the PPG and this is distributed to patients on both sites and to local businesses and religious institutions.

The Priorities for the survey and how they were agreed

In order to determine the priorities for the survey we:

Consulted with our PPG in July 2013

Asked patients attending the practice

Emailed patients/PRG

Asked for priorities on the practice website

The method and results of the patient survey

Once we had established the priorities we developed the questions using:

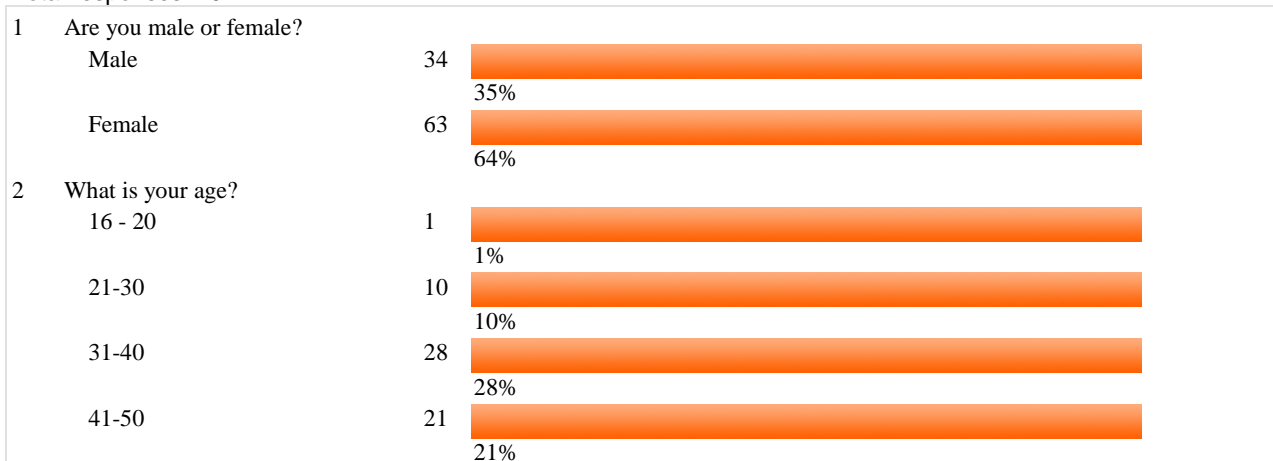
Paper forms

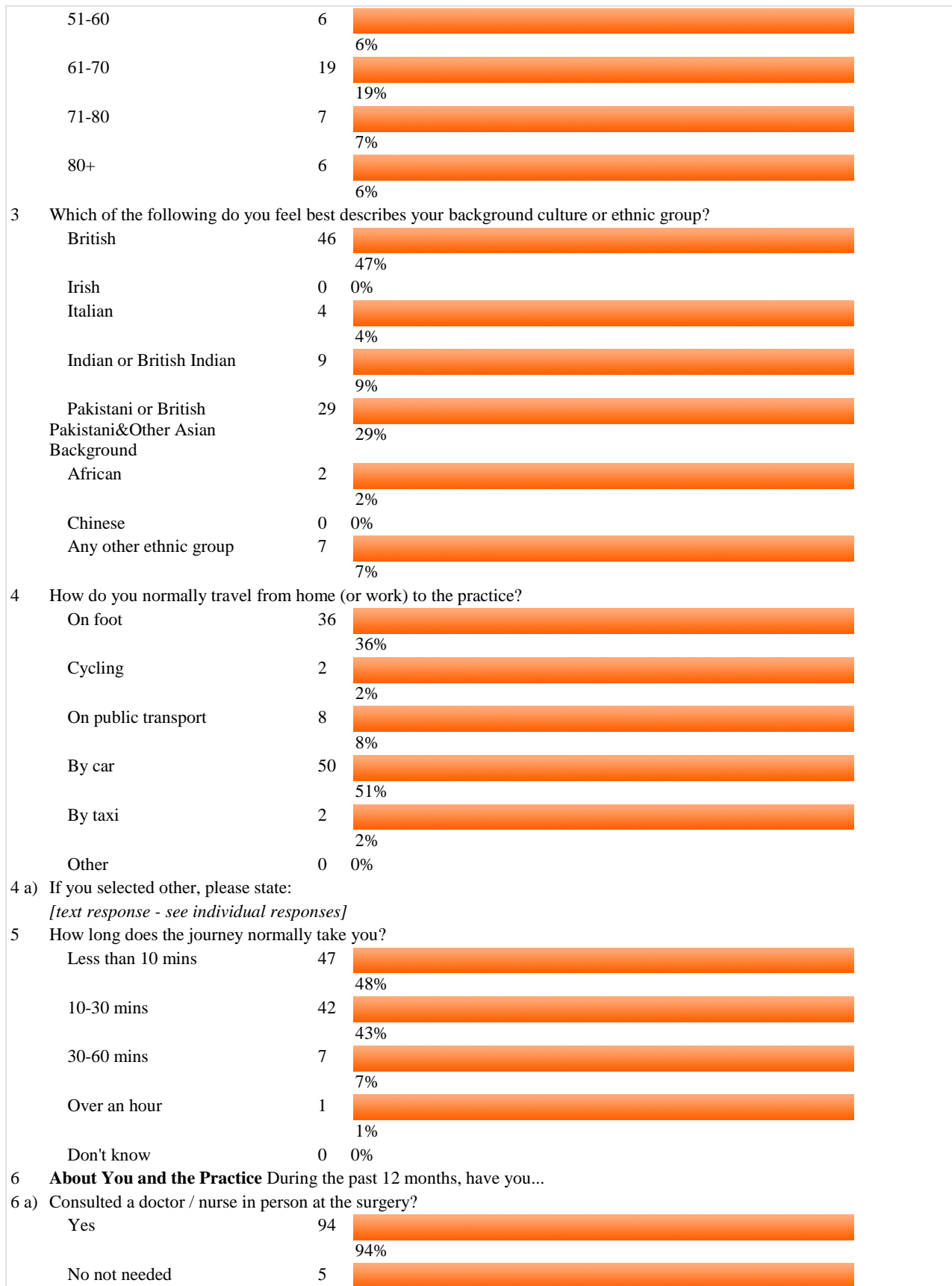
Email forms

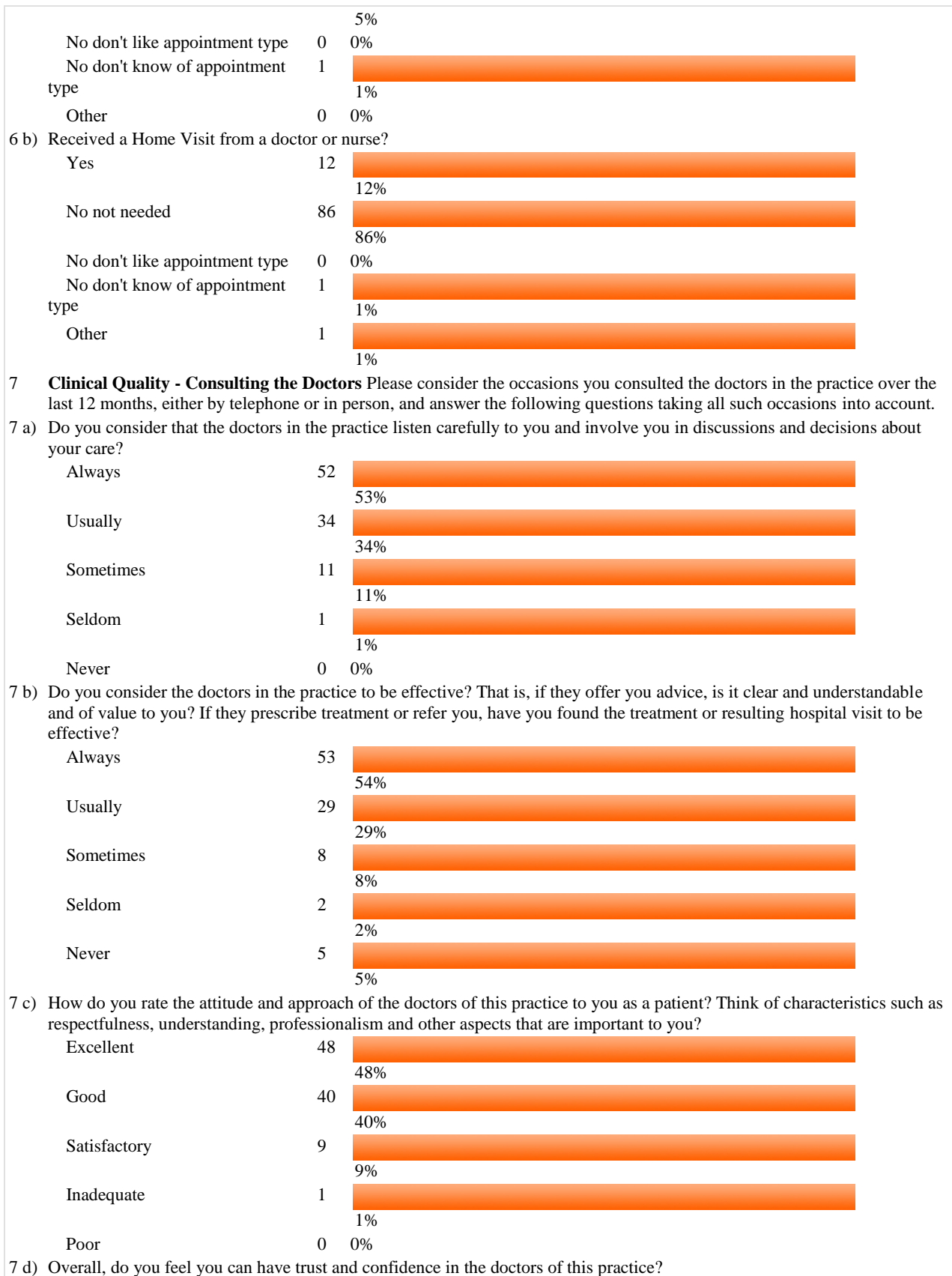
Survey tool on our website

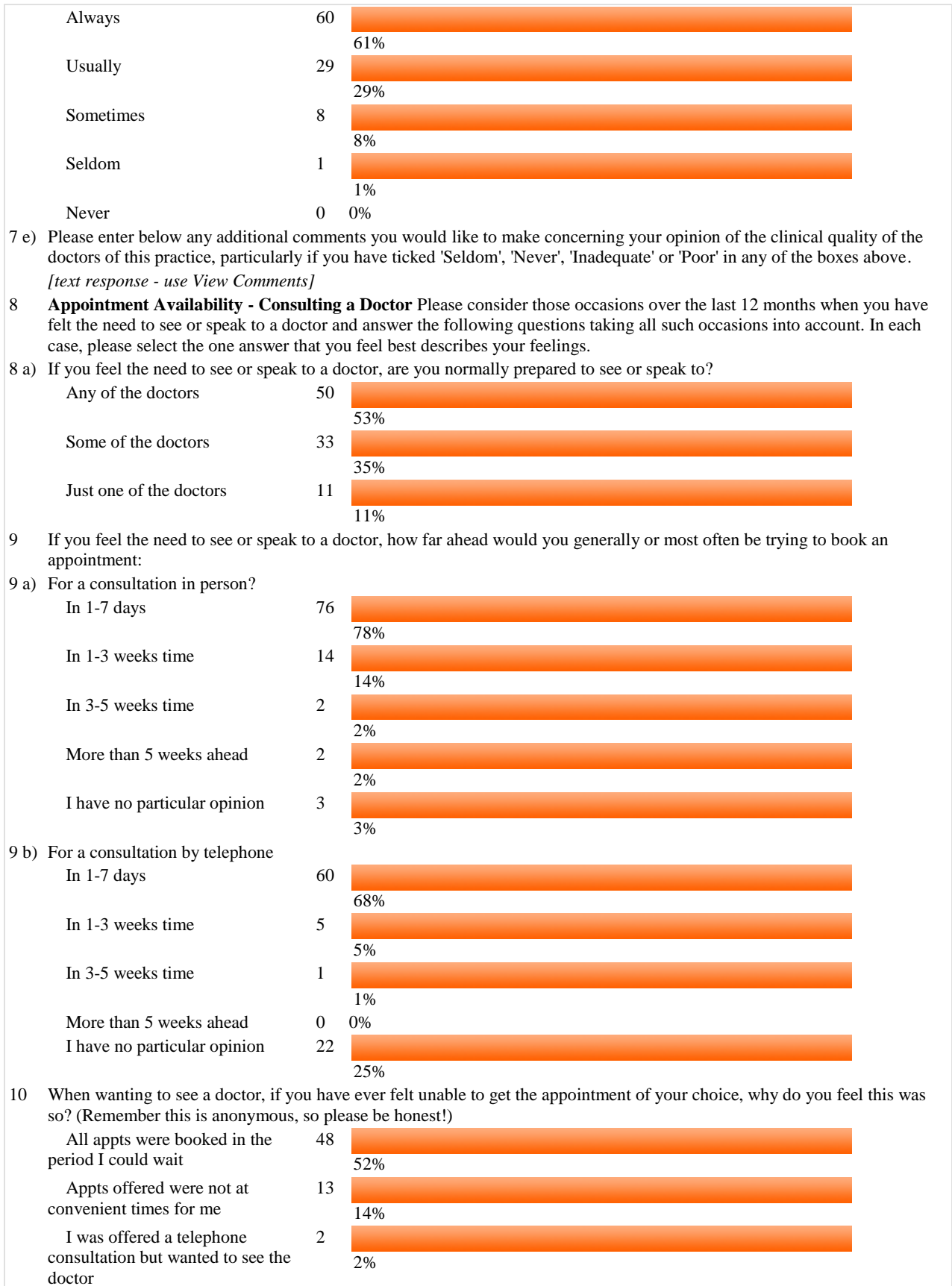
We carried out the main survey between November 2013 and February 2014

Total responses: 101









	I was offered a specialist nurse, but I wanted a doctor	2	2%	
	I did not want to see the doctor(s) I was offered	5	5%	
	Some other reason (please describe in Comments)	1	1%	
	Never had this problem	21	22%	
11	Bearing in mind the answers you have given above, how would you rate your overall experience of making an appointment?			
	Excellent	27	28%	
	Good	40	42%	
	Satisfactory	18	18%	
	Inadequate	5	5%	
	Poor	5	5%	
12	Please enter any additional comments you would like to make concerning your opinion of the ability of the practice to fulfil your wishes - particularly if you have ticked 'Inadequate' or 'Poor' in answer to the last question above <i>[text response - use View Comments]</i>			
13	How likely is it that you would recommend this Practice to a friend or family member? (Please select your answer where 1 is very unlikely to recommend and 10 is would strongly recommend the practice to a friend or family member)			
	1	3	3%	
	2	2	2%	
	3	5	5%	
	4	3	3%	
	5	3	3%	
	6	3	3%	
	7	4	4%	
	8	22	24%	
	9	20	22%	
	10	24	26%	
14	If you have given a low score please let us know why? <i>[text response - use View Comments]</i>			
15	General Comments (Please put any comments not covered in the survey below, particularly how you think how we could improve. Please keep your comments and suggestions as realistic and practical as possible) <i>[text response - use View Comments]</i>			

The Action Plan that was agreed and how it was agreed

In order to develop the action plan the practice met to discuss this on 13th February 2014. From the information in previous national surveys and from feedback from our PRG the practice discussed how best we could use the information to aid the practice. It was agreed that the most dissatisfaction from patients was obtaining appointments and therefore this was given priority in our Action Plan. The comments in the surveys were discussed. It was encouraging that there were many positive comments.

Positive Comments

Been happy with this practice at Queens Park and Riverfield Drive.
Excellent place – very clean and organized. Well done.
I think overall it's a great surgery and doctors are great. The receptionists are very good and caring and try to find an appointment every time. Thank you receptionists.
I am generally happy with the care that I receive from the practice.
I have been with this practice since 1937 and have a great respect for all of them from Dr Boyde to the present.

However, 10% of responders rated us poor or inadequate and we felt it important to endeavour to understand why. Unfortunately not all of them put comments to explain why they had scored us low. When discussing the comments we did have, we were still left with questions, for instance, when a patient says that all appointments are fully booked for the next week, could that be with a specific doctor? We will ask the opinion of the PPG when developing our next questionnaire how we can best deal with this.

Negative Comments

You have to wait for appointments for long time, by that time sometimes you start getting better or it is too late.
The booking system has improved. But it is still difficult to get an appointment within an acceptable time.
Appointments are fully booked for the next week.
Trying to make an appointment on the day always proves to be a challenge even when calling at 8.00 a.m. with appointments generally already having been taken and no more being available. There is too long a wait for appointments which are not the same day.

We were already operating an Access Action Plan and one of the actions is that patients are allowed to book ahead as far as they require. However, this has resulted in them forgetting their appointments and not attending. The practice uses the texting facility so that patients can be reminded of their appointment.

In order to get comments from the PRG on the draft Action Plan we:

Emailed the PRG group

Published the report on our website

We agreed the action plan with the our PPG on 13th February 2014

The main actions were:

Tackle our non attender rate to enable to free up appointments.

Consider our opening times.

How to improve access.

The progress made with the action plan

The summary of the progress as of March 2014 is:

You said

Appointment availability

We did

Plan how to tackle our non attender rate

The results are:

We are continuing to inform patients of our non attender rate weekly and, wherever possible, the impact on the practice and patients is explained to them, for instance if patients do not attend or book more than one appointment and do not cancel the latter one. Some patients also book several appointments for other members of their family or community and it has been noted that often these patients do not attend. It was requested at our PPG meeting that leaders of the community will speak in the Mosque to explain the impact on the availability of our appointments

We have put larger and more posters up in the surgery and we will continue to write to those patients that do not attend for a concurrent three appointments. We also write to all patients that have booked through Patient Partner directly with an explanation that appointments can also be cancelled or checked in the same manner. Sadly it is often the same patients that frequently do not attend. We have also started to include a paragraph in these letters saying that if this behavior continues they will be invited into the practice to discuss the problem. There will also be a feature once again in the next PPG newsletter. The posters do provide a talking point at the surgery but it tends to be from our compliant patients that are surprised that so many appointments are unattended.

It was the intention last year that, after each surgery, all non attenders would be telephoned. This does not happen after every surgery due to time constraints but it does still happen from time to time. The approach used is "You did not attend for your appointment at the surgery today, are you OK?" The feedback has been very interesting, from the very apologetic to annoyance. We will persevere as much as possible to endeavour to get our message across that these wasted appointments are a

waste of resource and unfair on other patients who are not always able to obtain the appointment of their choice because of the DNAd appointments.

You said

Improve access

We did

Opened at lunch time and provided a Saturday morning surgery. Provided a new system, Patient Partner, so that there is another method of accessing our appointment system. Telephone appointments. Increased the sessions of our Minor Illness Practitioner

Opening Hours

Opened at lunchtime and provided a bi-monthly Saturday morning surgery.

Patient Partner

The practice invested in a new system called Patient Partner where patients can book, cancel or check an appointment from their telephone key pad. Patients can also book via telephone, in person or by the website but this gives patients another option and they can choose the slot and GP they require, 7 days a week, 24 hours a day.

Telephone Appointments

If there are no appointments left on the day of the patient telephoning, these patients are given a telephone slot. These are shared out between all GPs on duty. The GP will then decide whether that patient needs to be seen on that day or to make an appointment for another time. We are using the advanced access system, always endeavouring to deal with today's work today.

Minor Illness Practitioner

Our Minor Illness Practitioner also has increased her sessions to 7 per week. She has also just qualified as a Minor Injuries Practitioner and we are hoping this will enable her to prevent avoidable A&E attendances. By increasing her capacity we have been able to free up more GP slots.

You said

Consider our opening times

We did

Discussed and agreed to maintain current hours. Please note we have recently changed our hours so that we are open at lunchtime at Queens Park and by providing a bi-monthly Saturday

morning booked surgery. In March 2014 we will also offer a late practice nurse clinic one night per week.

Confirmation of our opening times

Although the majority of our patients were happy with our opening times there were those that suggested a change in times. At present we operate a full 9.00 a.m. – 6.30 p.m. service on both sites and offer extended hours of late evenings three times a week with the last appointment at 7.40 p.m.

Recent changes to our opening hours have been to open during lunch hour at Queens Park Surgery and we also introduced a Saturday morning booked surgery twice a month.

As a result of the survey we have not changed our opening times but we have decided to maintain the enhanced extended hours. They are:

Queens Park opens five/six days a week. The premises are open from 8.00 to 6.30 p.m Tuesday and Thursday and until 8.00 pm (last appointment at 7.40 pm) on Monday, Wednesday and Friday. A Saturday morning booked surgery operates twice a month. The surgery is closed on Sundays and Bank Holidays. There are GP and Nurse sessions every day at both Queens Park and Honeysuckle Way.

The appointment times at Queens Park are as follows:

Morning	Monday to Friday	9.00 am to 11.30 am
	Saturday (bi-monthly)	9.30 am to 11.30 am
Afternoon	Monday to Friday	2.00 pm to 4.30 pm
Evening	Tuesday and Thursday	4.30 pm to 6.20 pm
	Monday, Wed, Friday	5.00 pm to 7.40 pm

NB: We are open during lunch time at Queens Park Surgery.

The session times at Honeysuckle Way are as follows:

Morning	Monday to Friday	9.00 am to 11.30 am
Afternoon	Monday, Wed, Thursday	3.30 pm to 5.30 pm
Evening	Tuesday and Friday	4.30 pm to 6.20 pm

NB: The surgery at our branch surgery Honeysuckle Way is closed between 1pm and 2pm Monday to Friday.

For out of hours service please call 01234-351661. The calls are then passed on to the out of hours service BEDOC. BEDOC is a GP led service and works under a contract from NHS Bedfordshire.

For dental problems please call 01234-310210 if you are not registered with a dentist.

Please ring the surgery number 351661; a recorded message will give you the telephone number of the duty doctor (have a pen and paper ready). **PLEASE LISTEN TO THE ENTIRE MESSAGE** – it will be repeated. There is always a doctor on call for urgent advice and consultation.