

# Bridport Medical Centre

## Local patient participation report 2012/13

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### 1 Profile of practice population and PRG

#### Practice population summary

Please see Appendix 1 for a summary of our practice profile (age, gender, and ethnicity)  
The steering group remain committed to gain representation from the groups below:

- Under 18s
- Young mothers
- Drug users
- Over 50s
- Housebound
- Carers
- Patients living with chronic disease
- Workers
- Disabled
- Patients with mental health issues

#### PRG profile/Process to recruit PRG

The virtual Patient Reference Group (vPRG) has been widely advertised to patients within the surgery (see Appendix 2) and via the practice website. Application forms to join the group are available. In the past year, the virtual reference group has increased in number to 78 members (several patients have opted out of the group so this does represent a significant increase). We are in the process of obtaining up-to-date information for all members of the vPRG by asking them to complete the application form.

Despite our best efforts, at the present time the vPRG remains predominantly White British ethnicity which does, however, reflect the practice patient demographic. Age split as follows

15 – 24	1.3%
25 – 34	4%
35 – 44	4%
45 – 54	8%
55 – 64	17.3%
65 – 74	33%
75 – 84	21.3%
Over 85	10.6%

Demographic information for patients responding to the survey was also collected (see appendix 3)

## **2 Process used to recruit to our PRG**

Supported by Eilish (Practice Manager) the PRG steering group (5 volunteers as before) took responsibility for ensuring the questionnaire reached as diverse a population as possible, using the “hub and spoke” approach. Groups identified as below:

- **Housebound patients**
- **Disabled patients**
- **Young patients**
- **Young mothers/ patients living with chronic disease**
- **Over 50s**
- **Mental Health**

The steering group also spent time with patients in the reception area, in order to reach a better understanding of issues facing our patients today.

Our initial survey was also handed out a reception to any patients wishing to “have a say” in how our services are provided. Posters were displayed in the surgery.

An invite to join the PRG was distributed at reception and will be sent ongoing with any recall letters sent by the surgery (see Appendix 2)

## **3 Priorities for the survey and how they were agreed**

In 2011/12 our focus for the survey was “access to appointments”. As stated in our previous report, “telephone access” was the other main area highlighted. The PRG steering group felt that this should be the area for the 2012/13 questionnaire.

## **4 Method and results of patient survey**

Once we had established focus of our survey, the virtual reference group were contacted to ask them for ideas for survey content (see appendix 4). The steering group then met to devise a first draft questionnaire which was sent to the vPRG for agreement (see appendix 5).

Questionnaires were completed via the following routes:

- Hub and spoke promotion by steering group
- Random distribution at reception desk
- On-line via [Bridportmedicalcentre.gpsurgery.net](http://Bridportmedicalcentre.gpsurgery.net)
- Face-to-face to a member of the steering group in reception
- Via post/email to our vPRG

**(Cont'd)**

## Survey results

Over 700 questionnaires were distributed. 552 responses were returned, reaching a significant sample of over 25 responses per 1000 patients (with a higher return than 2011/12). Demographic information was also requested (462 returns)

Please see Appendix 6 for the results of our phones/access survey (charts and associated comments)

## 5 Resulting action plan and how it was agreed

To develop the action plan, the steering group met to discuss the survey results on 18<sup>th</sup> February 2013 and a first draft action plan was devised.

Results of the survey and first draft of the action plan was emailed/posted to the vPRG by 22<sup>nd</sup> February 2013 for comment (see appendix 7). Comments from this survey were collated (appendix 8) and used to formulate the action plan below. The report and action plan are displayed in reception and online.

The action plan is attached. The main actions were:

- Further develop online services (appointment booking/ prescription requests) to reduce demand on phone system at peak times (reduce wait times)
- Re-record voice message on automated system
- Improve quality of hold music on automated system
- Consider option to cancel appointments via automated phone system
- Reinforce information to patients about peak call times/longer wait times to access via the phone

## Progress made with the action plan

A summary of the progress as of 31 March 2013 is:

You said...	We did...	The result is...
Further develop online services	Online services will be advertised: On registration, with new patient pack (ongoing) Online via website (completed) Via phone message (in progress)	
Re-record voice message on automated system	Messages have been reviewed and script improved.	

	Messages being recorded by ttnc, professional voice recording (in progress)	
Improve quality of hold music on automated system	New music (suggested by a member of the vPRG) has been purchased. Will be converted to suitable format and uploaded when messages re-programmed (in progress)	
Consider option to cancel appointments via automated phone system	This option was previous in place and caused confusion for our more elderly patients, who left messages requesting appointments with no contact details. High risk. Decided to not progress this action, but reinforce option to cancel via the website.	
Reinforce information to patients about peak call times/longer wait times to access via the phone	Welcome message incorporates information regarding busy times (in progress)	

The above action plan, together with our survey results will be displayed in the surgery throughout April/ May 2013. Results will remain posted on our website.

## **7 Confirmation of our opening times**

As a result of the survey we have not changed our opening times. See practice booklet for current times.