

Patient Reference Group – report 31.3.2014
(this should be read in conjunction with the Practice Survey)

Methodology – the Practice followed the 6 steps outlined by the CCG.

- **Step 1: Develop a structure that gains the views of patients and enables the practice to obtain feedback from the practice population, e.g., a PRG**

The Patient Representative Group (PRG) was initially established by reviewing the Practice’s demographic profile and actively making contact with patients who the Practice felt satisfied a cross section of patients determined initially by age. Patients in each of the ‘age groups’ indicated below were contacted to invite to become a ‘group member’. This had limited success. Alongside this we established a website where patients can volunteer online and promoted the opportunity to volunteer within the practice environment with display material. To date we have a ‘group’ of 18 registered patients made up as follows:

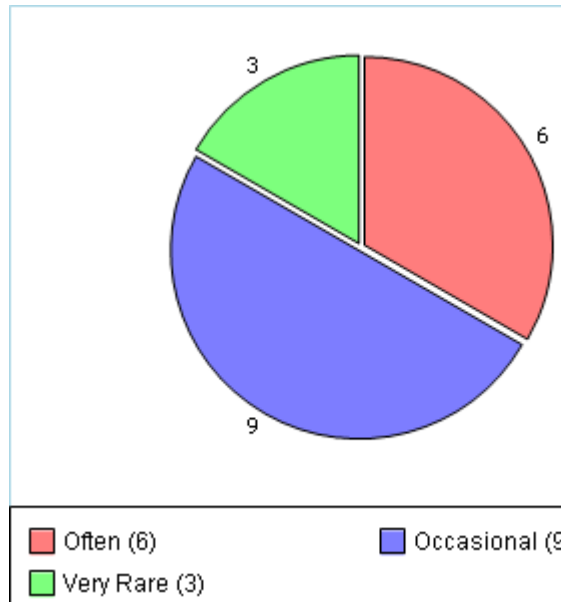
PRG & Survey Results Report

Patient Reference Group

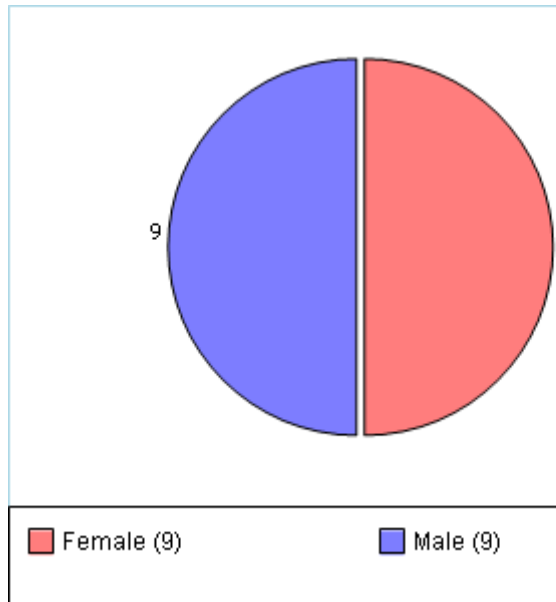
The patient group comprises 18 members

Distribution Details

Attendance

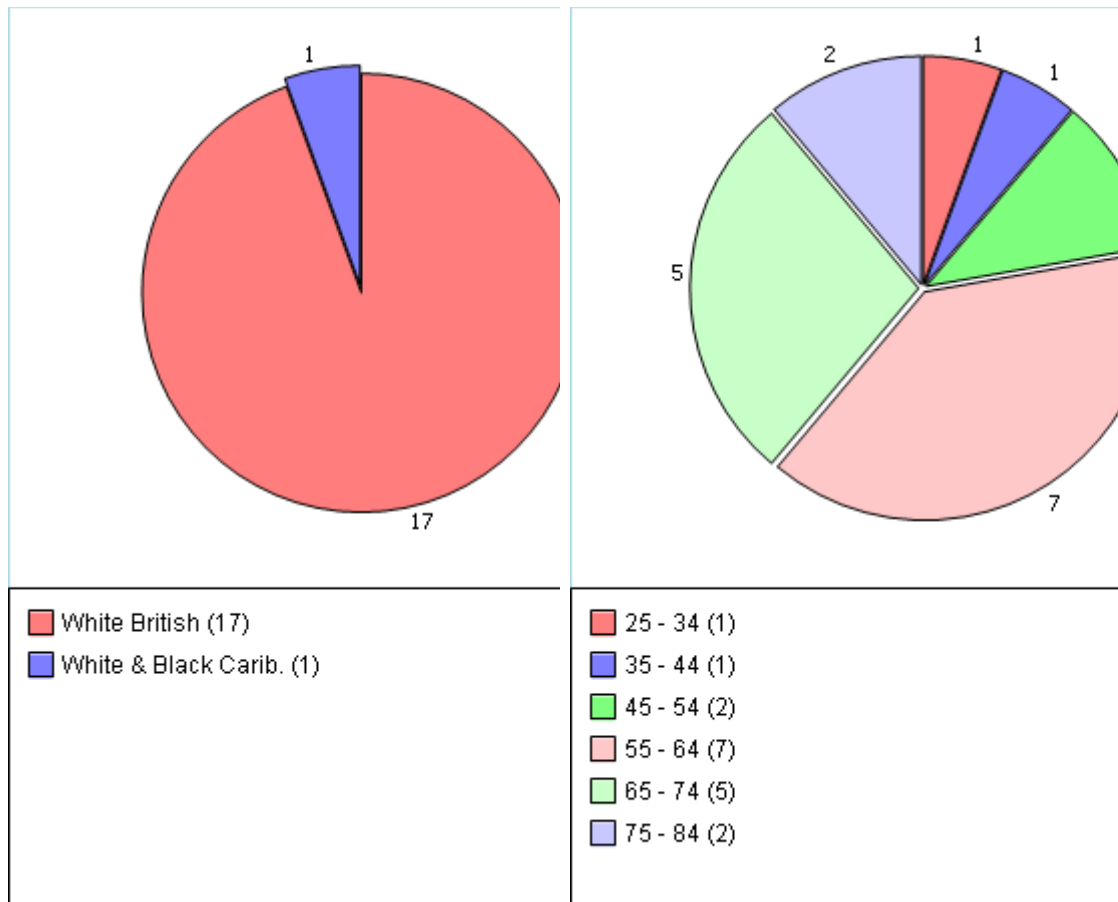


Gender



Ethnicity

Age



Survey Results

- **Step 2: Agree areas of priority with the PRG**

Following the ‘young person’s survey’ in 2013 it was agreed in consultation with the PRG to conduct a survey around the services provided by our Nurse Practitioner for this year. This is an excerpt from the communication with the PRG.

“Our suggestion for next year’s survey (with your approval) would be to produce a questionnaire around access and availability for the Advanced Nurse Practitioner. We would be grateful if you could support us in this proposal”

Respondents from the PRG were supportive with the Practice suggestion for conducting a survey to gather the views of patients regarding the Nurse Practitioner service.

- **Step 3: Collate patient views through the use of a survey**

The practice constructed the Nurse Practitioner survey in consultation with the PRG. The ‘draft’ survey was sent to members of the PRG on 11.11.2013 for comment. Copy of e mail content:

“ Dear PRG member (old and new),

You may remember that following last years ‘survey’ we agreed to produce a survey this year to promote and raise awareness for our Nurse Practitioner. She compliments the GP service offered at the surgery.

I would be grateful if you could review the attached survey draft and please get in touch with me if you have any comment to make. I hope to commence the circulation in December and I will, or course, feedback to you with the results. I will assume assent to the draft if no representation is received from you by 27.11.13.

Thank you for your support and please respond to me to confirm receipt even if you have no comment to make. The Practice really appreciates your help.

Yours sincerely,

*Mrs Janet Toole
Practice Manager.”*

The ‘draft’ survey was attached to this e mail above.

On receipt of the replies from PRG members I amended the ‘draft’ and resent the final survey again to the PRG. Copy of e mail below:

“Dear PRG member,

Many thanks for the feedback on the Nurse Practitioner Survey we recently asked you to review. We have listened and amended the survey thanks to your comments.

Please follow the link below to the survey and answer all the questions.

Please can I trouble you to complete the revised survey as the previous survey was in draft form and will not contribute to the final results. Some of you had very valuable comments to make and I hope you will take the time to repeat them in this final survey.

Kind regards.

Your Practice Team.”

The survey was uploaded to the website in November 2013 and hard copies were given out at the reception desk to target appropriate patients directly. A total of 59 survey responses were collated between November 2013 – January 2014. The majority of responses were gained by directly targeting patients as they cam in to see the Nurse Practitioner.

The responses were analysed and reviewed at the Practice.

- **Step 4: Provide the PRG with the opportunity to discuss survey findings and reach agreement with the PRG on changes to services**

The ‘results report’ and a proposed action plan were e mailed to the Patient Group on Thursday 20.2.14 to gain views and feedback from the Group.

All members of the PRG were e mailed ‘the report’ with the following letter and proposed action plan to engage the Group regarding feedback/suggestions/agreement to proposal.

Dear patient group members (old and new),

We are contacting you to ask for your help in reviewing the results of the recent 'Nurse Practitioner' survey conducted at Westcroft House.

A total of 59 responses were received via the website and over the reception desk at the Surgery. We have added surgery comments to the attached report of the results but we would be happy to hear your comments and suggestions, if you have any.

We would like to invite you to review our findings (attached). We would welcome your comments and any thoughts you may have regarding the results and the proposal for next years survey.

I would be grateful if you could acknowledge receipt of this e mail, even if you feel you have no comment to make regarding the analysis or proposal. However, we will assume assent to the draft proposal if no representation is received from you by Friday 7th March 2014.

Thank you very much for your continued support to Westcroft House, it is very much appreciated.

- **Step 5: Agree action plan with the PRG and seek PRG agreement to implementing changes**

Respondents from the PRG agreed with the action plan proposal. There were some positive comments made to support the plan, for example, “very good results, I fully endorse your proposals” and “the letter heading is a good idea”. There was such a positive response to the proposals that there was no need to amend the action plan.

The following action plan was therefore agreed.


Action plan – proposal.

We have reviewed the responses from the Nurse Practitioner’s Survey. We are very encouraged by the responses as 100% of the respondents ‘would be completely happy to see the Nurse Practitioner again’ and 99% of respondents would ‘recommend her to family & friends’.

As a Practice we have made the following observations with recommended actions.

OBSERVATION	ACTION – recommendations.	BY WHOM
➤ We were encouraged by the positive responses regarding	➤ Feedback to members of the PHCT. Agenda item for nxt PHCT mtg.	➤ JT

<p>putting you at ease, being polite and considerate, listening to you and giving you enough time.</p> <ul style="list-style-type: none"> ➤ Also, assessing your medical condition, explaining your condition and treatment, involving you in decisions about your care, providing or arranging treatment for you. ➤ The balance of results is generally 'good to very good' regarding consultations for the Nurse Practitioner. ➤ Her consulting skills are very good & patients felt they had confidence that she was 'honest & trustworthy (99%)'. 	<ul style="list-style-type: none"> ➤ Meet with Nurse Practitioner to discuss the findings. ➤ Include Nurse Practitioner in evaluating the findings and seek her opinion on any suggestions. ➤ Circulate to PHCT for feedback and suggestions. 	
<p>The Practice is actively trying to promote this service.</p>	<ul style="list-style-type: none"> ➤ Receptionists to continue to remind patients of the n/p service. Survey results supported this by demonstrating that 64% of pts were referred to n/p from the reception. ➤ Encourage & support reception 	<ul style="list-style-type: none"> ➤ Primary Health Care Team.

	<p>to offer telephone consultations in preference to a GP thus enabling GP's to free time for other tasks.</p> <ul style="list-style-type: none"> ➤ Publicise results on the website ➤ Make results available in the waiting room at Westcroft 	
<p>We feel that this service could be better utilised by patients. The survey results would indicate that patients who use the service would be completely happy to see her again (100%). Our challenge is to find ways to promote the service and encourage more patients to consult with her.</p>	<ul style="list-style-type: none"> ➤ Consider including the nurse practitioner on Westcroft headed paper. ➤ Website. Continue to promote n/p on Westcroft website. ➤ Newsletter. Consider a paragraph (photo?) in the newsletter with a brief work history prior to joining us 	<ul style="list-style-type: none"> ➤ JT to discuss with partners & secretary.  <p>Letter heading draft</p> <ul style="list-style-type: none"> ➤ JT to discuss with Sheila.
<p>Over ¾ of the respondents were female. One possible explanation of this could be that female pts felt more comfortable with a female clinician. The practice feels there is a better balance of male and female clinicians since the introduction of the nurse practitioner.</p>	<ul style="list-style-type: none"> ➤ Pts can choose to consult with a female clinician on Monday, Tuesday and Friday (3 days) and a male clinician on any weekday morning (5 days). As a Practice we may take this into consideration for future business planning to see if greater equality could be gained. 	<ul style="list-style-type: none"> ➤ Jt to discuss with partners.
<p>All age groups were represented in the survey which gives good</p>	<ul style="list-style-type: none"> ➤ Despite certain limitations for access to the nurse practitioner 	<ul style="list-style-type: none"> ➤ JT to discuss with partners/ Sheila.

<p>balance to the interpretation of the results.</p>	<p>(n/p does not consult children under 2 years, certain male health problems or pregnant women) there seems to be a good spread of age groups consulting with her.</p> <ul style="list-style-type: none"> ➤ As a practice we may consider supporting n/p with training to enable her to consult with more patient groups? 	
<p>99% of respondents were from a 'white' ethnic group.</p>	<ul style="list-style-type: none"> ➤ This is probably a true reflection of the ethnic makeup locally. The survey was offered indiscriminately to pts who were consulting with Sheila or who accessed the website. 	<ul style="list-style-type: none"> ➤ No action needed
<p>Free text comments regarding Westcroft were generally good. The positive comments outweighed the negative comments but I have included a representative selection of both.</p>	<ul style="list-style-type: none"> ➤ Positive comments included <ol style="list-style-type: none"> 1. '1st class service' 2. 'excellent service provided on all our family visits'. 3. 'the nurse practitioner is a great asset to the surgery'. ➤ Negative comments included <ol style="list-style-type: none"> 1. 'generally good but cramped waiting room, wish doctors would stay at the practice longer'. 2. the waiting room 	<p>These positive comments support the n/p role.</p> <p>We are limited with space in the waiting area. We have covered the seats with a fabric which can be kept clean.</p> <p>The practice has recently introduced a 'call-in' system at the reception desk which embraces new technology. We hope that we have a</p>

	could do with a spot of modernisation'.	settled GP team for the Practice to lead us forward in the 21 st century.
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Proposal for next years survey?

We would like to propose that we conduct a survey regarding the sexual health services we offer at Westcroft. Specifically, we would like to conduct a survey regarding contraceptive implants and IUD takeup. West Cumbria has very high teenage pregnancy rates and unwanted pregnancies in general. Westcroft would like to target this area to review and see if there are any trends or problem areas where we can improve our intervention.

We have duly taken the views of the PRG into consideration and these have been reflected in the action plan. The PRG respondents indicated a favourable response to the proposal for next year and agreed with the actions outlined as a result of the survey for the Nurse Practitioner.

- **Step 6: Publicise actions taken and subsequent achievement**

Actions taken and update to the plan will be included in a timely fashion when each action is complete.