**Survey Report 2012/2013**

**Component 1 Profile of Practice Population and PRG
Practice Population Profile**

|  |  |  |  |
| --- | --- | --- | --- |
| **4442 patients** |  | **10 members in group** | **Difference** |
|   |   |   |   |
| **Patients** |  | **PRG** |   |
| Under 16 | 22% | 0 | -20% |
| 17-24 | 9% | 0 | -9% |
| 25-34 | 14% | 7% | -7% |
| 35-44 | 14% | 7% | -7% |
| 45-54 | 13% | 23% | +10% |
| 55-64 | 11% | 18% | +7% |
| 65-74 | 9% | 11% | +2% |
| 75-84 | 5% | 40% | +35% |
| Over 84 | 15% | 0 | -15% |
|   |   |   |   |
| **Ethnicity** |   |   |   |
| White British | 72% | 86% | +14% |
| White Irish | 2% | 0 | -2% |
| White & Black |   |   |   |
| Caribbean |   | 0 | -2% |
| White & Black |   |   |   |
| African | 1.5% | 0 | -1% |
| White Asian |   |   |   |
| Indian | 5% | 0 | -4.5% |
| Pakistani | 16% | 6.25 | -9.75 |
| Bangladeshi | .3% | 0 | -.3% |
| Caribbean | .04% | 0 | -04% |
| African | .2% | 0 | -.2% |
| Chinese |   | 0 | -.2% |
| Other | 3.5% |   |   |
|   |   |   |   |
| **MALE** | **2306** | **52%** |   |
| **FEMALE** | **2136** | **48%** |   |

* The practice has strived to make the group representative of the practice population and have done so since the implementation of the group in 2001. We have not had a lot of success in this endeavour over the years but have continued to try!
* We have all made an extra effort to include different groups of patients. We have had more success with our virtual group in the younger age group of patients.
* The PRG is a mixture of 6 who will attend meetings and 4 who we can contact by email. One member has not been well so we are contacting him by phone for his views.
* We have had a PRG since 2001 and the core members have remained with the group
To attract more group members we have advertised by posters and leaflets in the practice, on the website, on patient prescription message, and by word of mouth through the reception team.
* All of our patients who use email to contact us were asked if they would like to join the group in person or by email and 6 responded favourably, but only 2 are continuing to answer our emails.
* The practice has created terms of reference for the group and this has been discussed on at our patient meeting.
* All the email members were sent copies of the terms of reference and this year’s proposed patient survey for comment.
* We asked the virtual group for any ideas they had and to please contact us if they have any brainwaves.

**Local Patient Survey**

We asked all our members to comment on the survey before we asked patients to complete it

We have discussed the results of the survey with the patient group

We looked at the results of the national survey last year and at our complaints history and there are no obvious themes we need to pursue. We have no plans for massive change within the surgery – we have done all that in the past- having changed GP partners and building since 2006.

We held the paper survey w/b 11 February 2013 and have discussed the results with both the virtual and patient group. The survey was distributed throughout the week to patients who called at the surgery for any reason. We aimed to process approximately 120 surveys. We kept the initial survey very simple. The survey was available in reception and by e mail for our virtual group

The survey questions were first discussed in practice and with patient group to get a basic questionnaire, taking into consideration any practice priorities. There had been no major issues from the National Survey last year

A copy of the survey was sent by e mail to our virtual group and 1 members e mailed back with input. The rest of the group were invited to give us any ideas for questions and their opinion of the survey we had developed. There had been no major complaints that needed to be addressed.

The survey was on one sheet of A4 paper, as last year designed so that patients would not feel the survey was an onerous task and they would hopefully complete whilst they were in the practice and it would not take up too much of their time! The patient group agreed that this was important.

The survey was distributed from Monday 11 February 2013 and lasted all week. We had 115 completed surveys at the Batley and Gomersal surgery

All members of the practice team were involved during the survey and encouraged patients of a wide range of age and ethnicity to complete the survey.

Posters were widely displayed in the surgery to inform patients that we were holding a survey.

The survey results were counted during the week of the survey, one day at a time, to ensure this was not a major task once all the surveys were in. Once all had been counted percentages were calculated so we could get an overall picture.

The results of the survey showed no major issues, but a few areas that needed to be discussed at practice and PRG level.

The survey results were discussed in practice and sent by e mail to the virtual group and discussed with the PRG

**Action Plan**

* Discussion held re **how easy is it to obtain an urgent appointment with your doctor (Question 2)**. We have a very busy practice and appointments are soon taken up by patients. Some slots are held until the day to be used on the day. The patient can ring on the day at 8am onwards to obtain an urgent slot on the day. We are planning to [Audit](http://www.batleyhealthcentre.co.uk/pages/Patient-Participation-Group) our appointments in the next few weeks using a company who assess patient appointments and suggest ways of improving surgery systems and who have already been into surgery to explain the process. We have started to collect data and after 4 weeks of collection the company will come back to the practice and assess our data and talk about how we can make improvements.
* Again a discussion held re **opening times of the surgery** and whether we could go back to opening Saturday mornings? We are a small practice with only 2 GPs so this would not be easy for them after a full busy week at the surgery. It may be a future option but not at the moment.
* Discussion held re **How well does your doctor explain your medical condition to you (Question 6)** The group agreed that some people will ask as many questions as they can to find out exactly what is wrong and others just sit quietly and ask no questions. We have found a leaflet for patients to read whilst they are waiting which encourages them to think about their appointment and what questions they want to ask the [Clinician](http://www.batleyhealthcentre.co.uk/pages/Patient-Participation-Group) and therefore get the advice they want from the consultation. The group agreed that this may help some patients but others would have thought of this already. We agreed to give the leaflets a try as they may guide some of our patients.

**Component 5**

* The survey covered access and opening times, and discussions at practice level and PRG level have been held
* The surgery is open 8am – 6pm Monday to Friday. There is a late session once a week and this will change from Wednesday to Monday from April 2013. Someone answers the phone between 8am and 6pm. Our phones are then put through to the Out of Hours service. The new 111 service has just started this week and when a patient uses the service the practice is informed via the computer software and information is placed straight into the patient record so is immediately available for the [Clinician](http://www.batleyhealthcentre.co.uk/pages/Patient-Participation-Group) to see

**Component 6 Availability of Information**

* The PRG have been told they can access this report online or at the surgery or at the next PRG meeting. The virtual group have been told they can access on the practice website
* Notice in reception with details of website for patients to log into and access to report and the report is available in paper form for patients to read