

Brandon Lane Surgery

Patient Participation Reference Group
Report 2014 / 2015

This report summarises the development of our Patient Participation Group(PPG)

The PPG was established in 2003,as we have always felt it important to allow patients to voice their opinions on key decisions made within the Practice.

The first meeting took place in 2012. Clair McKay took over the role of the PPG co-ordinator in May 2013 when she joined the Practice. Carole Valente the HCA has also become a very promising and enthusiastic co-ordinator in 2015. With Caroles background and experience she will be taking over as lead co-ordinator for 2015/2016. However the Practice does expect that every member of Staff will be involved at some point and attend the PPG meetings which will now be held every two months. Staff members can share their views and ideas but also listen to and discuss the views of group members.

As the group had been going for a number of years Clair contacted as many of the group members as possible to confirm that they were still interested in being a part of the group. Due to patients leaving the Practice or moving house the group now stands at 20 members with an age range of 16 to 80 and is made up of 17 females and 4 males. Included in the group are young patients, patients with chronic diseases, unemployed and patients who are full time carers for their loved ones. Every member of Staff in the Practice promotes the PPG to new and existing patients in a number of ways – updating patient’s details at reception when patients are checking in for appointments and asking them if they would like to join the PPG. Doctors and Nurses mention it to their patients on a regular basis too.

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The patient group is 100% white British but we will continue to encourage representation from other ethnic groups.

The information below shows the profile of Brandon Lane PPG

Male under 16 white British – Brandon Resident
Female 25-34 white British – Brandon Resident
Female 35-44 White British – Brandon Resident
Male 75-84 White British – Brandon resident
Female 55-64 white British – Brandon resident
Female 35-44 – white British – Brandon resident
Female 45-54 – white British – Ushaw Moor
Male 45-54 – white British – Brandon resident
Female 75-84 – white British – Brandon Village resident
Female 75-84 White British – Brauncespeth Village resident
Female 45-54 White British – Brandon resident
Female 45-54 White british – Brandon resident
Female 64-75 White British – Meadowfield resident
Female 64-75 White British – Brandon resident
Female 45-54 White British- Brandon Resident
Male 45-54 White British – Brandon Resident
Female 45-54 White British – Brandon Resident
Female 75-84 White British – Brancespeth Village
Female 25-34 Chinese – Brandon Village
Female 54-65 White British – Brandon Village

The patient survey was carried out in September 2014 and was emailed to our Group Members for them to check or add any questions or any wording to be changed – as we did not receive any replies we presumed the questionnaire was fine. We handed out 100 questionnaires to our patients of both sexes and handed the survey out on various days and times so we covered a wide selection of practice population. This was again another good time to promote the PPG.

First of all we would like to thank all of our patients who took the time to complete the survey as your feedback is valuable to us to help promote and maintain a very high level of service for all of our patients.

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The main areas that we need to focus on:-

Waiting Times:-

This has been discussed in great length at our PPG Meeting and the PPG put forward that if a clinical member of staff was running over 15 minutes late then the patients arriving should be informed. As a practice we agreed it would be if clinical staff are running 30 mins late that reception staff must inform the patient and asked them if they are ok to wait or did they want to make another appointment – it was also agreed that if patient has to make another appointment due to time waiting then staff can use same day embargo slots. It was also brought to the attention of the group that many times it is not the fault of the clinical staff why they are running over but also can be the fault of the patient going in with more than one problem which would be impossible to discuss in a ten minute appointment slot. In order to solve this issue we have put signs up in the waiting area requesting that patients should only discuss one problem and if there is more than one issue they must make another appointment. Another problem that was highlighted is that patients turn up late for their appointments. As a practice we are trying to educate patients on the importance of punctuality and the knock on effect that late arrival can have on the surgery. If a patient is now ten or more minutes late for an appointment they must rebook another appointment. It was decided by the group that we will review this at our next PPG Meeting.

Appointment Booking

70% of our patients book an appointment over the telephone. The surgery is well aware that we need to promote on line access – now everyone who walks into the surgery and goes to reception will be issued with a password for online services – we have been piloting this now for a few months and can already see the number of people booking appointments and ordering prescriptions online has increased dramatically. Also the number of patients registered for online access has gone up from 0.3% to 34.8%. As a practice we will keep promoting online registrations.

A+E Attendances

The surgery has been looking closely at people who have visited A+E – and especially what time the patient visited and the reason why. We have been checking to see if appointments were available at the surgery when patients have visited A+E and to see if the reason they attended was something that could have been dealt with in the surgery. If so we have contacted those patients and explained the importance of using surgery appointments rather than A+E. We have also added two slots to our afternoon clinic for Drs and one for Nurse for A+E and one slot will be added in the near future for 111.

DNAs

We have also discussed the effect of wasted appointments when patients fail to turn up. We are planning another meeting and this will be discussed in greater detail at that time.

As a whole our patients are very happy with the care and service that they receive from us. However we always strive to improve at all times. We are regularly updating patients details in order for us to have correct means of contact and at the same time offering patients registration for online access. All of our staff are promoting the elephant kiosk so that patients can leave their feedback from Saturday Appointments, Minor Surgery Appointments and also so that our surgery can see if patients would recommend us to family and friends. We arranged for one of our PPG members to come in on a Friday morning and teach patients how to use the elephant. This has proved a great success as 61 people have said they would recommend this surgery to their family and friends. This is something the surgery is going to look at doing on a regular basis.

Within our PPG the members who attended our last meeting were eager to help the surgery to support local charities. The practice at present donates to the local food and clothes bank.

We also hold cake stalls, raffles and tombolas on an annual basis to support our chosen charities – again the group members are eager to help us and it was suggested that perhaps we could include Marie Curie to highlight the great service they provide.

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Our PPG meeting has decreased in the number of members due to people moving out of the area or changes in their circumstances where they no longer are able to be part of the group. However it has INCREASED in enthusiasm and loyalty and I feel very proud of our PPG and the members and I am glad that I am part of the group.

Next meeting 12th May 12th 2015