

QuayPoints

Special Edition

December 2011

The Patient Newsletter for East Quay Medical Centre

East Quay Medical Centre has a long standing patient group. Formed in 2003 before the move to the new premises, the group provides a critical voice and acts as a sounding board for developments in or involving the practice. It meets regularly with key people in the practice to hear about developments in the Practice and the wider NHS, as well as providing feedback on patients' experience of the Health Service, the results of surveys, and bringing forward complaints and compliments. The group has also been involved in events such as the diabetes awareness days; the carers support days and the 'flu clinics.

This year the government asked practices to involve their patient group to seek their fellow patients' views on an issue that was important to them. Our group believes that a major issue for patients in Bridgwater is the need to travel to Taunton to be seen in hospital for outpatients and a range of other services and treatments. So, at East Quay our discussions culminated in the group undertaking a patient survey in August on what our patients think about locating more health services in Bridgwater. The survey gave patients the opportunity to tell us where they think such treatments and services should be located and if so, which services or type of patients should be prioritised.

East Quay Practice Manager, Rachel Stark, said "The Group feel that the journey to Taunton can be painful or very tiring for some – especially those who need regular treatment and already in poor health. In addition the cost of travelling to Taunton would be unaffordable for some patients, whilst others would have difficulty in arranging transport". The Group also agree with the current government policy that most patients prefer to be seen locally where possible. The findings could help drive change that improves patients care by asking providers and commissioners to reconsider service location when reviewing services or developing new services."



The profile of the members of the PRG

Many members have been with the group since its inception but in recent years the group has grown and now includes a number of newer members. We are currently looking for younger members to join the group and propose to text message certain age bands asking if they would be interested in joining the group.

The group meet regularly – approximately every 6-8 weeks, alternating evening and lunchtimes. The Deputy Practice Manager, Customer Service Manager, Practice Manager and Lead GP attend. The lead GP rotates in the GP cabinet posts annually.

How did the group determine the issues to be included in the survey?

The group met in early June 2011 to consider the patient and practice priorities, the public health profile, recent patient survey results, practice planned changes and any known issues the practice had from complaints or previous surveys. This included areas such as deprivation, disease prevalence, rates for breast screening, cervical screening and diabetic retinopathy screening. They also considered childhood and flu vaccinations, obesity levels in Bridgwater and smoking levels. To review the practices commissioning and 'gatekeeper' role the group also considered hospital admissions (emergency and planned) as well as outpatient numbers for the practice population and the wider town. With regards to practice services they considered our own services: reception, the building as a whole, clinical care, appointment availability and the information available to patients.

Having discussed at length all these possibilities they decided to look and explore in more detail three options for a survey, these were:

- Increasing the services delivered in the town itself – bringing more services to a local location
- Reviewing and promoting personal responsibility for healthy lifestyle choices
- Ensuring the appropriate use of our and other local services by exploring patients beliefs and behaviour when using NHS services

After in depth discussions and debate the group decided the survey would be asking patients about the services they would like to see in Bridgwater. This very much aligned to patient, practice and public priorities.

How did the Group obtain the views of the patients?

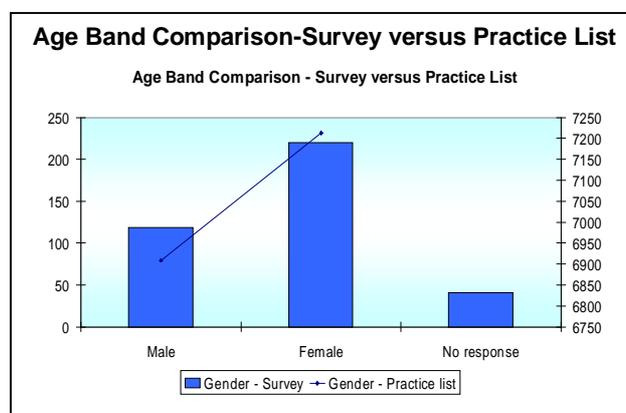
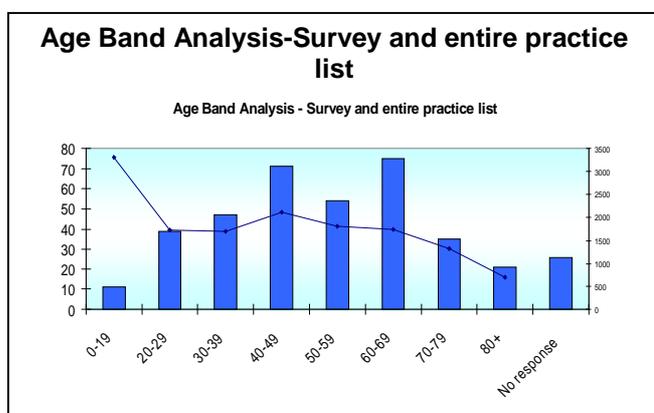
For logistical reasons and to support a high response rate, the group opted to use a one-to-one survey and that it would be conducted by the group in the waiting room. The group then outlined ideas for the survey design. With the direction from the group, the Practice Manager designed the survey paper. This was fully circulated to the group and all feedback incorporated into the final document.

We anticipated a survey response rate of 30% (We actually far exceeded this target in our responses.) This meant that we needed to run the survey for the amount of days it takes to see approximately 563 patients. At the time we offered, on a week when all GPs are in, 595 face to face routine appointments with the GP Partners.

Having agreed the format and target numbers, it was decided it would be delivered by the patient group members to all patients in the main waiting room during the week commencing 1st August 2011 and a timetable of which members would cover the sessions was put together. For safety and support, at least two group members were in the waiting room at one time. (Please note that to ensure that an isolated group of patients – the less mobile elderly – were included, the group also visited a local lunch club).

We allocated a separate room for those patients who wanted privacy. We also provided an information leaflet for patients. All group members had a photo badge and their photos and an explanation of the survey was displayed in reception the week leading up to the survey and the survey week. All patients booked that week were advised at the time of booking that the survey was taking place. Press releases were also successful, resulting in local printed press coverage as well as coverage on Somerset Sound.

Who replied?



What did the patients say?

Where would you prefer the services to be located?

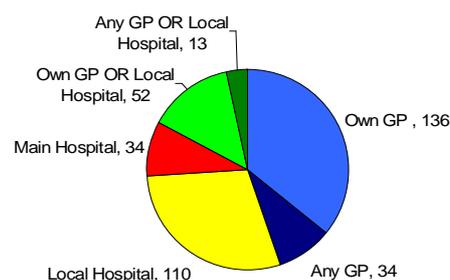
There is strong support for local service provision, be it in a GP practice or the local hospital.

The services we asked about were: Out Patients, Diagnostic services, ongoing treatment, clinics, one stop treatment/day case procedures and pre and post operative care.

There was no clear distinction between the type of services to be located locally or kept centrally.

There was also no major distinction on which type of patient should be prioritised in terms of moving services locally – for example the more frail, or where patients need frequent and numerous appointments (the range of scores being 2.04 to 3.01 when respondents were asked to rank 4 different options).

Where would you prefer the services to be located?



What Happens next?

The group decided that the results of the survey – namely the strong support for more local services – should be communicated to a number of people/organisations. Firstly, it is important to feed back to the patients at the surgery and this would be done using: the TV screen in the waiting room, Quaypoints, the practice website and articles in the local press. In addition, the group felt that the results will be of interest to local services providers and commissioners. As such the findings would also be sent to:

- The local PCT, the local Clinical Commissioning Group and the local federation and practices in the federation
- The local District Hospital and the local community Hospital
- The Health Minister and the local MP

In addition, the group felt that other patient groups and practices may be interested in the design of the survey and perhaps undertaking it to get a wider local opinion. Therefore the results would also be sent to local federation patient participation groups and the PCT facilitators of groups.