# **FAIRFIELD SURGERY**

Dr J W Brassill & Dr L Saeid

278 Manchester Road Warrington Cheshire WA1 3RB

# **PATIENT PARTICIPATION GROUP REPORT**

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## **INTRODUCTION**

Fairfield Surgery introduced a Patient Participation Group in 2011. The purpose of this group is to ensure that our patients are involved in decisions and the range and quality of services provided by us as a practice. This includes patients being involved in decisions that lead to changes in our services and to promote proactive engagement of our patients through the group and to seek the view of our practice patients through a local survey.

## **MEMBERSHIP, ENROLLMENT & MEMBERS PROFILE**

Any registered patient can be a member of our patient participation group but they must be a registered patient of the practice. To initially establish the group the practice advertised the intention to hold Patient Participation Groups on their Practice Newsletter and asked for volunteers. The practice being very close to the town centre has a varied patient profile and to encourage membership representative of our practice population the practice wrote to some patients in certain groups to invite them to become a member of this group thus enabling us to have a good representation of our practice profile of patients. This latter approach also ensured the Practice had a reasonably sized patient group which broadly represented our Practice patient profile, as the response for volunteers was slow.

We feel our member profile represents our practice profile well and our members range in age and sex. Our practice list size is approximately 2,700 patients and our patient participation group consists of 10 registered patients. Our youngest member of the group is 28 and our oldest member is 85. Several members of the group are registered at the practice with their families and children.

#### **MEETINGS**

Meetings are held regularly in the Practice and Dr Brassill (senior partner) acts as the chair for the meetings. Patients in the group are also given the opportunity before and after each meeting to have a chat and discuss any issues they may wish prior to Dr Brassill joining them. Dr Brassill has guided the meetings to focus on areas that we can do something about. For example it is pointless discussing parking when we are not in a position to do anything about this or a coffee machine in the waiting room, when again this would be impossible due to the size of our waiting room and the Health and Safety issues this would raise. The group are encouraged by Dr Brassill to focus on areas they feel we can improve realistically.

With the above in mind it was left to the Patient Group to consider the questions that they would like to put in the questionnaire that was made available to our patient population. The group felt that there was scope for more information to be made available to patients, on the day to day running of the practice, ordering repeat prescriptions, booking appointments, getting results and their options if referred to secondary care. Advice on treatment of simple ailments and where to access information on welfare benefits was deemed worthwhile also.

It was decided to do a patient survey to establish if there did appear to be a need for this additional information. The survey was done in February 2012 and supported the view that more information would be beneficial to patients.

## **SURVEY**

A local Practice Survey was devised using the questions supported by our patient participation group. The survey was in the form of a paper questionnaire as this was deemed as the best method for obtaining the views of our patients. It was agreed that the best method of accessing the patient population was to hand out a copy of the questionnaire to patients accessing the surgery during a working week. Hopefully, using this method, we are giving patients who are accessing the surgery on a regular basis, the opportunity and encouragement to complete the survey, thus ensuring a good response.

The survey was completed in February 2012 by patients who attended the surgery and 60 were completed which is over 2% of our patient list size.

The survey showed a high level of satisfaction with the Practice performance but there appeared to be some patient lack of knowledge on repeat prescribing procedure, options available if referral to secondary care is deemed necessary. The survey also supported the idea of more information on the management of common ailments and some advice on welfare benefits.

#### **ACTION PLAN**

The results were collated and analysed by the practice and the results discussed at the next group meeting on Tuesday 20<sup>th</sup> March 2012. This enabled the practice and the group to discuss and develop an action plan to be implemented by the practice.

The practice already produces a regular newsletter updating patients on various issues but it was decided that the best place to include this information was the Practice Booklet.

The practice is now in the process of producing a new Practice Booklet incorporating the information felt appropriate from the survey. The proposed new booklet will be circulated to the members of the patient participation group. After which a further

meeting will be held to discuss the groups views. Amendments will be made accordingly and it will then be submitted for printing in April/May 2012.

## **OPENING HOURS**

Our opening hours are 8am – 6.30pm Monday to Friday. Patients can contact the surgery at all times during these hours by phone or in person

## EXTENDED HOURS

Dr Brassill has an extended hours surgery on a Tuesday evening 6.30 – 8.00pm two weeks out of every three and Dr Saeid offers an extended surgery every third Wednesday 6.30 – 8.00am.