

**T**emplate for Information to be included in Local Patient Participation Report

**Stage One – demonstrate that the patient group is representative**

Demonstrate how the Patient Reference Group is representative by providing a detailed breakdown of the practice population below:-

**Total Practice Population**

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Age** | | | | | | | | |
| **Under 16** | **16-24** | **25-34** | **35-44** | **45-54** | **55-64** | **65-74** | **75-84** | **85+** |
| 1712 | 770 | 1059 | 1200 | 1166 | 955 | 790 | 512 | 226 |

|  |  |
| --- | --- |
| **Gender** | **No.** |
| Male | 4233 |
| Female | 4147 |

|  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Ethnicity** | | | | | | | | | | | |
| **White British** | **Irish** | **Mix Carribean** | **Mix African** | **Mix Asian** | **Indian** | **Pakistani** | **Bangladeshi** | **Black Carribean** | **African** | **Chinese** | **Other** |
|  |  |  |  |  |  |  |  |  |  |  |  |

Specific care groups e.g. nursing homes, learning disabilities, drug users, carers

|  |  |
| --- | --- |
| **Specific Care Group** | **No. of Patients** |
|  |  |
|  |  |

**Patient Reference Group**

Demonstrate how the Patient Reference Group is representative by providing a detailed breakdown of the Patient Reference Group membership below:-

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Age** | | | | | | | | |
| **Under 16** | **16-24** | **25-34** | **35-44** | **45-54** | **55-64** | **65-74** | **75-84** | **85+** |
|  |  |  | 1 |  | 2 | 6 | 2 |  |

|  |  |
| --- | --- |
| **Gender** | **No.** |
| Male | 2 |
| Female | 9 |

|  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Ethnicity** | | | | | | | | | | | |
| **White British** | **Irish** | **Mix Carribean** | **Mix African** | **Mix Asian** | **Indian** | **Pakistani** | **Bangladeshi** | **Black Carribean** | **African** | **Chinese** | **Other** |
| 11 |  |  |  |  |  |  |  |  |  |  |  |

Specific care groups e.g. nursing homes, learning disabilities, drug users, carers

|  |  |
| --- | --- |
| **Specific Care Group** | **No. of Patients** |
| Carer | 1 |
|  |  |
|  |  |

|  |
| --- |
| **Differences between the practice population and members of the Patient Reference Group** |
| Describe any variations between the practice population and the Patient Reference Group membership. Provide details of the efforts the practice has made to reach any groups that are not represented.  *Despite many invitations we still lack representation from ethnic groups, i.e. Asian, Eastern European. We would also welcome some younger members to the group but this has also proved very difficult.* |

**Stage Two – validate the survey and action plan through the local patient participation report**

|  |
| --- |
| **Survey** |
| Describe how the priorities to be included in the local patient survey were identified and agreed with the Patient Reference Group.  *Meeting held on 21.06.13 Discussion took place regarding the questions the group would like to see included in this year’s questionnaire. Some amendments were made. See attached minutes.* |
| Describe how the questions included in the local patient survey were drawn up.  *The questions were chosen from both PRG members and practice representatives and in response to suggestions put forward by patients attending the surgery as in previous years.* |
| Provide details of the methodology used to carry out the survey including the following:-  How the survey was conducted i.e. by paper or electronically, in the surgery or by mail  How the patients to be surveyed were selected (they should be representative of the practice population)  The number of patients surveyed  The number of surveys completed  Details of how the survey was analysed i.e. in house or outsourced.  *The clinical software was interrogated to provide a random search of patients to whom the postal questionnaire would be sent. (50)*  *Attendees at the surgery were approached at random and asked to complete a survey. (50)*  *Survey was advertised in the waiting room both on the notice board and electronically.*  *Web site was updated to include the survey along with an electronic link for submission.*  *63 questionnaires were returned.*  *Results of returned completed questionnaires were discussed with the group14.11.13 and therefore they were analysed in house. Suggestions were discussed and acted on. See attached minutes.* |
| Provide details of the survey results.  *List of questions and breakdown of the results are attached to this form.* |
| Provide details of how the practice discussed the results of the survey with the Patient Reference Group.  *Meeting was held with the group in order to discuss the points raised on the survey.* |

|  |
| --- |
| **Action Plan** |
| Describe how the practice agreed the action plan for implementing the findings or proposals arising from the local practice survey with the Patient Reference Group. Please enclose a copy of the agreed action plan.  *Following the group discussion, any practical (i.e. physical) suggestions were acted upon (please see attached report.*  *Other organisational issues would be discussed in practice and actions formulated.* |
| Detail any findings or proposals arising from the local practice survey that have not been agreed as part of the action plan and the reasons why.  *N/A* |
| Detail any proposals which impact on contractual arrangements.  *N/A* |

|  |
| --- |
| **Local Patient Participation Report** |
| Provide the practice website address on which the Local Patient Participation Report has been published. Please enclose a copy of the Local Patient Participation Report.  www.stgeorgessurgery.co.uk |

|  |
| --- |
| **Opening Times** |
| Provide the opening hours of the practice and the method of obtaining access to services throughout core hours.  *The opening hours are published in our practice leaflet and on the web site.* |
| If the practice has entered into arrangements to provide extended hours access please provide the times at which individual healthcare professionals are accessible to registered patients.  N/A |