

BENNFIELD SURGERY

Patient Representative Group Report 2014-2015

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1 Profile of Practice

As of January 2015 there were approximately 7700 patients registered at Bennfield Surgery. This is a slight reduction from the previous year.

The Surgery has been located on Corporation Street since June 2003 having moved from the previous premises in Warwick Street to a purpose built practice which provides up to date facilities including ease of access for disabled and able bodied patients alike.

The Surgery is open Monday to Friday between the hours of 8.30 am and 6 pm. In addition to this, as part of the 'extended hours' arrangement, there is a pre-booked appointment surgery on a Saturday morning.

The Coventry and Rugby Clinical Commissioning Group organise the Out of Hours Service for urgent care in Rugby when the surgeries are not open. Patients are able to dial the NHS 111 service and will be then given advice as to the appropriate health service care for their need. This service is also available for patients when the practice is closed for county wide training organised by the Coventry and Rugby Clinical Commissioning Group. This is usually held monthly on Thursday afternoons.

2 Patient Reference Group

The Patient Reference Group was established in 2011. We advertised the group on our web page www.bennfieldsurgery.co.uk, put posters up in the Surgery and wrote to several patients who we thought might be interested in joining. We have tried to include patients who are carers, disabled, ethnic groups and people of all ages. However the group remains very small and we would always welcome new members.

We had a meeting of the Patient Reference Group in January 2015. It was attended by Dr Warburton, the Practice Manager, Patient Services Manager and eight members of the group. Patient 'Voice Groups' are held usually every two months in the Rugby area and members of PRG groups can attend these meetings. Health Summits are also advertised when they occur in the area and the public are welcome to attend if they wish to do so.

3 Summary of 2014-15

The past year has been a very busy year for the Surgery. In 2014 we became an accredited training practice. We now work alongside the West Midlands Deanery to provide general practice training experience to doctors who wish to specialise in primary care. Our first trainee doctor joined us in August until Christmas 2014 and he has now moved on from the practice to continue his training in other areas.

Our second doctor joined us in November 2014. Dr Twinn is with us part-time and she will be here until February 2016.

Dr Doherty and Dr Barnes are both accredited trainers. Dr Doherty supervises and mentors other doctors who are currently on the GP Training Programme and they will join us in the future as part of their training.

The doctors feel this is an important programme for the practice to partake in as there is currently a national shortage of GPs and we hope that our participation in this programme will help to alleviate this, even if only in a small way.

There are also other regular services at the practice. These include Physiotherapy (twice weekly), Counselling via IAPT (improving access to psychological therapy), and the Midwife who runs two clinics weekly.

At the end of March 2015 our very valued Nurse Practitioner Di Spooner is retiring. She will be very much missed by her fellow workers and the patients alike. We have been lucky to employ a new Advanced Nurse Practitioner Carlyn Dunster-Sigtermans who started working with us at the beginning of March this year. We are confident that Carlyn will become as much of an asset to the surgery as Di has been over the last 27 years.

One of the practice nurses is also leaving at the end of March this year and we have now appointed a new nurse who specialises in diabetic care who is joining us at the beginning of April.

One of our management team left the practice at the end of October which has resulted in a slight re-organisation. We have recently appointed a new receptionist/administrator and are currently in the process of employing a second to complete the team.

This year we have not undertaken an annual practice survey as a new bench mark has been the introduction by NHS England called The Friends and Family Test. This has now been adopted across both primary and secondary care establishments and is now part of our ongoing contract and replaces the need for the yearly survey.

Friends and Family is a simple question that is asked when patients attend the practice. It is 'How likely are you to recommend our GP Practice to friends and family if they need similar care or treatment?' Patients can also comment on the reason for their response if they wish. The results are uploaded to NHS England on a monthly basis who collates the replies.

In the press recently there has been a significant amount of negativity regarding the NHS and primary care in particular with regard to pressures on A & E services. The Patient Reference Group discussed this at the meeting in January.

At the practice we make every effort to deal with our workload on a day-to-day basis and do not actively encourage patients to seek help from either A & E or the Out of Hours service. We do try to offer a number of options to patients who have difficulty in booking appointments

to see the doctor; for example when appointments become available through cancellations we attempt to contact other patients so that the slots are always booked.

It is acknowledged that primary care as a whole is currently under immense pressure as well as the acute and secondary care facilities and the staff and doctors at Bennfield Surgery work hard to constantly manage an extremely heavy workload.

4 Action Plan for 2015-16

- 1 The group would like the practice to review triage, the possibility of lunchtime surgeries and times of appointments and flexibility to help those who work and find attending difficult.
- 2 Review the telephone system to see if the queuing system can be easily amended to accommodate more incoming calls and enable patients to be held in the queue for longer. It should be noted however, that some of the members of the group were not keen for any change to be made.
- 3 Review of the disabled parking spaces available in the car park. It was agreed to contact our landlords to check that the spaces did comply with regulations regarding disabled patients.
- 4 Look at whether two members of the group would be willing to take on the role of Chairman and Secretary of the Patient Reference Group. This would be still be supported by the practice.

5 To Conclude:

The doctors and the practice management staff appreciate the involvement and input of the members of the patient reference group. In the future we hope that the members will consider taking on the organisation and running of the group which would be supported by the practice. We would welcome any new members who can contact Trish Thomas at the practice for further details.

We look forward to any constructive feedback from our patients and any of our management team are always happy to discuss any issues to help improve the service we provide.

A copy of this report will be available on the practice website. Copies will also be available at the practice and sent to all members of the Patient Reference Group.