



**Describe steps taken to ensure that the VPRG is representative of the practice population in terms of gender, age and ethnic background and other members of the practice population:**

The highest proportion of our adult patients lies in the age group 45 – 54 years old with 55-64 year olds a close second; the lowest proportion of adult patients lies in the age group 17 - 24 years. Our recruitment to the group reflects the demographic spread of our patient list quite well although we still haven't yet had success in reaching the age groups <24 years. Our demographic split as regards gender is 50:50, and as yet we haven't been able to match this exactly within the group where the balance male to female is currently 35:65. We are trying to encourage more men to join the group via the practice's website and publicity in the practice through our patient information screens. Our members too come predominantly from those patients who usually attend the Eynsham Medical Centre (EMC); we would like to encourage more people to join who normally attend our branch surgery at Long Hanborough (LH). A full and accurate ethnic profile of the practice's population is not available through clinical coding and so it is not possible to assess the group's correlation against this criterion; however, coding aside, the practice is believed to have an extremely low level of ethnic diversity that would not have a statistical bearing on such a small group.

We have been trying very hard to balance the gender ratio as well as attracting members from the "24 and under" age group; however, so far this has not shifted significantly. To make our services more appealing to younger people and people who work full-time we have ensured that our new website is compatible with smart phones and tablets, and we have increased the services available online to patients. Furthermore, we are widening our scope with regards to texting patients. We will shortly be using texts to invite people to join our VPRG and to complete the Friends and Family Test.

**Are there any specific characteristics of your practice population which means that other groups should be included in the VPRG?  
e.g. a large student population, significant number of jobseekers, large numbers of nursing homes, or a LGBT community? YES**

**If you have answered yes, please outline measures taken to include those specific groups and whether those measures were successful:**

Since we have a higher than averages number of elderly patients we have redesigned our website to offer more services than before, and we try to tailor the information on the website to reflect the patient population. This should enable housebound or less mobile patients to access our services more easily. We are also very amenable to offering advice on the telephone to patients who are struggling with using the website or

EMIS Access. We also link in with local groups to 'get our message out' to the population, for instance we use parish newsletters to advertise our flu clinics, and for the last 3 years we have set up flu clinics in one of the village halls.

## **Review of patient feedback**

### **Outline the sources of feedback that were reviewed during the year:**

We acquire information about our service from patient surveys in the surgery, including the Friends and Family Test feedback, and by viewing comments on the NHS Choices website. Patients are also able to complete the Friends and Family Test on our website and soon will be able to complete the test by replying to a text message. We accept email comments through a feedback form on the website, and always reply to the comments. We also have a robust complaints process, which includes a complete review of all complaints received during the year.

## **Priority areas and implementation**

For the last few years we have been focusing on the following 3 areas:

- Improving patient access;
- Improving the service provided by our reception/dispensing staff;
- Increased use of technology.

These remain our priorities, albeit we feel from the feedback we have received during the past year that our front line team is now providing a good level of service. Improving access, on the other hand, becomes more and more challenging each year. With our increasing list size but very little increase in funding to support this growth we have had to look at imaginative ways to address this problem. GP triage has continued, which seems to be popular with most patients, although we realise it does not suit everyone. Two new services have been introduced throughout West Oxfordshire in the last year: the Witney Neighbourhood Hub and the Early Visiting Service (EVS). These have been funded by an additional pot of money provided by the Prime Minister's Challenge Fund, which was made available to assist practices in setting up

alternative services to improve patient access. The Witney Neighbourhood Hub may have been used by some of you; it is a service which our GPs are able to refer patients to, who have what appears to be uncomplicated, acute problems which may be resolved in one visit to a GP. The EVS is a paramedic run service which is intended to reduce the number of acute visits made by the GPs to housebound patients, hence releasing them to visit more complex patients, who are likely to need more than one visit. Both of these services are being well used by the practice and if you have any experience of either we would welcome your feedback. It is hoped that these services will continue to be funded, because there is clear evidence that both these services help to alleviate the pressure on same day appointments at the surgery. We are, however, aware of the time some patients are still waiting for a routine appointment. If anyone is able to propose any innovative ways to address this issue we would be very pleased to hear from you.

Patients have in the past raised concerns regarding the poor level of service offered by some of our receptionists. The feedback we have received would indicate that there has been a marked improvement in the quality of service being offered by our receptionists, who are finding their jobs much harder to perform with the increase in demand for appointments. Our senior receptionist has now been in post for over a year, and we feel this has made a big difference to the way the reception team functions, in particular its flexibility and responsiveness to patients' issues. Furthermore, we have invested a lot of time and money in training for our front line teams. We hope that you have noticed the improvement, but we always welcome constructive feedback.

Increased use of technology was our third target last year and the previous year. Patients who are able and willing to access our website are now able to make appointments, order medication, see test results and allergies, and soon will be able to view a summary of their medical record. We realise there are some patients who still prefer to speak to someone face to face or on the telephone; however, by increasing the amount of information available electronically through EMIS Access, or the level of electronic communication possible, we should be able to improve the service available to everyone. I know many of you have provided us with feedback on the website and on EMIS Access, which has not always been as user friendly as we would wish it to be, but if you feel that it still does not provide you with the service you require, in a format you require it, please let us know.

To improve communication further we are in the process of commissioning a new telephone system, which should be up and running within the next month. We hope that this will enable us to be more responsive to your calls and to improve call handling at peak times. We are also extending our texting capability to include not only appointment reminders, but also invitations for chronic disease reviews, smears, etc.

I am sure you are all aware of the requirement for us to offer patients the opportunity to feedback about their experience by means of the Friends and Family Test. This has now been running for over a year and the results are published on our website each month. We have received a limited response to the Friends and Family Test; however, we will soon have the capability to send out texts asking people to complete the Friends and Family Test. Conversely, please visit the NHS Choices website (<http://www.nhs.uk/pages/home.aspx>) and provide your feedback about the practice.

The Patient Reference Group has been running as a virtual group for a few years now, and the feedback we have received recently is that the majority of its members prefer to keep the group as a virtual one; it suits people who have busy working lives, as well as our large elderly population many of whom are housebound or of limited mobility. If you would be interested in joining the group please contact the practice.

Finally, we would like to thank everyone, including the members of the Patient Reference Group, who has taken the time to provide us with feedback about the service we provide to the local community. We do receive many suggestions as to how we might improve our service, but we also receive many positive comments about the support we provide. Please continue to provide us with feedback, because it helps us to understand the needs of our local population and gives us the opportunity to tailor our service to meet those needs in the best way possible.

Thank you.

The Partners and Staff of Eynsham Medical Group