North Yorkshire and Humber Area Team

2014/15 Patient Participation Enhanced Service – Reporting Template

Practice Name: CHURCH VIEW SURGERY

Practice Code: B81062

Signed on behalf of practice: C DOYLE Date: 19 March 2015

Signed on behalf of PPG: S Beedham Date: 23 March 2015

1. Prerequisite of Enhanced Service – Develop/Maintain a Patient Participation Group (PPG)

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| Does the Practice have a PPG? **YES**  |
| Method of engagement with PPG: Face to face, Email, Other (please specify) Email and Post. |
| Number of members of PPG: 36 |
| Detail the gender mix of practice population and PPG:

|  |  |  |
| --- | --- | --- |
| % | Male  | Female  |
| Practice | 49.5 | 50.5 |
| PRG | 53.5 | 46.5 |

 | Detail of age mix of practice population and PPG:

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| % | <16 | 17-24 | 25-34 | 35-44 | 45-54 | 55-64 | 65-74 | > 75 |
| Practice | 16.2 | 7.83 | 9.25 | 11.5 | 15.67 | 14.6 | 14.25 | 10.7 |
| PRG | 3.33 | 3.33 | 6.66 | 13.33 | 16.66 | 16.66 | 20 | 20 |

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| Detail the ethnic background of your practice population and PRG:

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| --- | --- | --- |
|  | White | Mixed/ multiple ethnic groups |
|  | British | Irish | Gypsy or Irish traveller | Other white | White &black Caribbean | White &black African | White &Asian | Other mixed |
| Practice  | 10151 | 4 |  | 38 | 4 | 1 | 4 | 2 |
| PRG | 35 |  |  | 1 |  |  |  |  |

|  |  |  |  |
| --- | --- | --- | --- |
|  | Asian/Asian British | Black/African/Caribbean/Black British | Other |
|  | Indian | Pakistani | Bangladeshi | Chinese | Other Asian | African | Caribbean | Other Black | Arab | Any other |
| Practice | 2 | 4 |  |  | 2 | 6 | 1 |  |  |  |
| PRG |  |  |  |  |  |  |  |  |  |  |

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| Describe steps taken to ensure that the PPG is representative of the practice population in terms of gender, age and ethnic background and other members of the practice population:**Variety of patients were initially invited to join our PPG which included a range of patients including gender, age and different service users, i.e. care home, mental health, long term conditions etc.****The vast majority of our patients are white ethnicity.****We continue to advertise and promote our PPG via newsletter, our website and noticeboards.** |
| Are there any specific characteristics of your practice population which means that other groups should be included in the PPG? e.g. a large student population, significant number of jobseekers, large numbers of nursing homes, or a LGBT community? **NO**If you have answered yes, please outline measures taken to include those specific groups and whether those measures were successful: |

1. Review of patient feedback

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| Outline the sources of feedback that were reviewed during the year:The practice carried out an annual patient survey during the year 2014/15. We also have a patient concern/suggestion box which is reviewed monthly. We also take part in the Friends and Family Test and review patient complaints and therefore we collect patient feedback from a variety of sources.We also undertake surveys with regards to a particular service, i.e. Long Term Conditions. |
| How frequently were these reviewed with the PRG?We have a patient notice board that provides feedback to our practice population and also email our PRG regarding any actions that the practice undertakes. Following our recent patient survey – results of these have been shared with the PRG. We aim to review feedback and concerns with the PRG at least twice per year. |

1. Action plan priority areas and implementation

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| Priority area 1 |
| Description of priority area:Waiting times for appointments at community clinics was highlighted as an issue. |
| What actions were taken to address the priority?Discussed local schemes and used recent ‘none recurring funding’ to secure physio schemes and improve access for some services including self-refer processes. The practice with the CCG will continue to monitor waiting times and service provision. |
| Result of actions and impact on patients and carers (including how publicised):Increasing capacity and offering a range of services that are also closer to patients.New service and current services details and self-referring processes displayed on website and noticeboard.CCG have also arranged for locality advertising to be done regarding services for our patients. |

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| Priority area 2 |
| Description of priority area:Getting through on the telephone in the morning can cause concerns and frustration for patients.Seems to be a low uptake in people using the internet to book appointments.From the survey people prefer to book appointment via telephone at 68% and only 12% via the internet. This could be due to awareness or preference. |
| What actions were taken to address the priority?Advertising and promoting online booking facilities to see if this improve the uptake.Explaining that we offer pre booked appointments and telephone consultations.New practice leaflet produced. Extended opening hours will continue to be offered by the practice. |
| Result of actions and impact on patients and carers (including how publicised):Easier access for patients. Offering a variety of ways to access services, i.e. appointments, telephone consultations to improve patient access. Saturday morning clinics are available for both the GP and/or nurse. |
| Priority area 3 |
| Description of priority area:Concern raised on patient survey about patients overhearing what the receptionists say.73% said it was an issue but don’t mind, 15% said yes it is an issue and they are not happy about it. |
| What actions were taken to address the priority?Staff reminded of confidentiality and that we can offer a private room for patients if they wish. This is displayed at the reception desk. The practice has also put in a partition between the reception front desk and the back office where reception staff answer telephones so that confidential calls are not overheard at the front desk by patients.All staff receives confidentiality training. |
| Result of actions and impact on patients and carers (including how publicised):Patients to be confident that the practice does respect their privacy and that they can have confidence in speaking to staff in person or via the telephone confidentially. Notice is displayed in the reception area. |

Progress on previous years

If you have participated in this scheme for more than one year, outline progress made on issues raised in the previous year(s):

The CCG continues to monitor waiting times at Hull and East Yorkshire Hospitals and have provided direct access to specific consultants for GPs.

Services in the community – the practice has NHS Health Trainers available in the practice and also a physiotherapist (6 month pilot). We also continue to host counsellors and other providers depending on room capacity.

Confidentiality in reception – Staff continue to receive training and awareness sessions on confidentiality. An internal wall has been put up between the front desk and back reception so that conversations cannot be heard in the main reception area.

Text messaging service to continue and used to as appointment reminder service.

New patient self check-in system provided in the reception area – so that patients do not have to wait to check in with the reception staff.

Continued promotion of our online services.

1. PPG Sign Off

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| Report signed off by PPG: **YES**Date of sign off: 23 March 2015 |
| How has the practice engaged with the PPG:How has the practice made efforts to engage with seldom heard groups in the practice population? Via internet, face to face, paper surveys, FFT, patient comments and suggestion box, review of complaints. Care home patients have also been approached.Has the practice received patient and carer feedback from a variety of sources?Yes as above.Was the PPG involved in the agreement of priority areas and the resulting action plan?YesHow has the service offered to patients and carers improved as a result of the implementation of the action plan?New pilot service offered for patient benefits. Patients are routinely offered telephone consultations and online booking and facilities are encouraged which gives a greater range of access options.Do you have any other comments about the PPG or practice in relation to this area of work?We have struggled to recruit new members of the PPG but continue to promote and encourage new and current patients to join. We offer post or email communications. |