

Patient Participation Review 2014-2015

Practice details: **St Michaels Surgery**

Practice code: **L81069**

Stage one – validate that the patient group is representative

Demonstrates that the PRG is representative by providing information on the practice profile:

Does the Practice have a PPG – Yes face to face and Email/Newsletter

Practice population profile	PRG profile	Difference
Age		
% 18 – 24 - 12%	% 18 – 24 - 10%	n/a
% 25 – 34 - 16%	% 25 – 34 - 13%	n/a
% 35 – 44 - 13%	% 35 – 44 - 22%	9%
% 45 – 54 - 14%	% 45 – 54 - 18%	4%
% 55 – 64 - 10%	% 55 – 64 - 8%	n/a

Practice population profile	PRG profile	Difference
%65 – 74 -8%	%65 – 74 - 18%	10%
%75 – 84 -4%	%75 – 84 – 11%	7%
% Over 85 – 2%	% Over 85 - 0% (1 member)	2%
Ethnicity		
White	White	
% British Group - 96.88%	% British Group – 85.7%	
% Irish – 0.22%	% Irish -	
Mixed	Mixed	
% White & Black Caribbean – 0.53%	% White & Black Caribbean -	
% White & Black African -0.22%	% White & Black African -	
% White & Asian -0.18%	% White & Asian -	
Asian or Asian British	Asian or Asian British	
% Indian – 0.68%	% Indian – 14.3%	

Practice population profile	PRG profile	Difference
% Pakistani – 0.06%	% Pakistani -	
% Bangladeshi – 0.06%	% Bangladeshi -	
Black or Black British	Black or Black British	
% Caribbean – 0.45%	% Caribbean -	
% African – 0.34%	% African -	
Chinese or other ethnic Group	Chinese or other ethnic Group	
% Chinese – 0.2%	% Chinese -	
& Any Other – 0.38%	& Any Other -	
Gender		
% Male – 50.4%	% Male – 48%	n/a
% Female – 50%	% Female – 52%	n/a

<p>Differences between the practice population and members of the PRG</p> <p>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:</p>	<p>The list is reviewed every 4 months in an attempt to engage with a wider membership and enhanced representation of the patient base – particularly with regard to a wider mix of ethnic representation. We have approached the Action on Hearing Loss- Residential Home whom we serve to request representation from Carers and those with Learning Disabilities but sadly they have declined to join the group at this time.</p>
<p>Are there any specific characteristics of your practice population which means that other groups should be included in the PPG? Eg a large student population, significant number of Jobseekers, large numbers of nursing homes, or a LGBT community</p> <p>NO</p>	<p>If you have answered YES, please outline measures taken to include these specific groups and whether those measures were successful:</p> <p>See above</p>
<p>Is the group virtual or face-to-face?</p>	<p>Both</p>
<p>How many members are there on the PRG?</p>	<p>89 (we operate an open list size for the virtual membership)</p>

<p>Step 2 – Review Patient Feedback</p>	
<p>Outline the sources of feedback that were reviewed during the year:</p>	<p>Friends and Family Test Patient Complaint Letters</p>

	Patient Compliment Letters Primary Care Assurance Framework
How Frequently were these reviewed with your PRG	Annually & ongoing
Priority Area 1	
Describe the priority area:	Increase access to appointments
Why was this priority identified:	Length of time for next available routine appointment was increasing
What actions were taken to address this priority	We appointed a Nurse Practitioner – a new role for the Partnership – to be able to assist with appointment triage, patient and reception staff education, and support to GPs for routine on the day acute appointment needs.
What were the results of the actions and what impact on patients and carers.	Since November 2014 we have been able to make more appointments available to patients and their carers both via the Nurse Practitioner role and by freeing up appointments with GPs and giving them greater appointment availability. Patient and staff feedback has suggested that the role is a huge success and we propose to extend the Pilot for a further 6 months.
How was this publicised.	Notices in reception and over the telephone to all patients who ring in to book an appointment.

Priority Area 2	
Describe the priority area:	The development of a practice newsletter to support recruitment of new members to the

	Patient Participation Group to enhance its representative ability and generally improve communication with Patients.
Why was this priority identified:	At the Patient Participation Group on 15 th September 2014
What actions were taken to address this priority	A quarterly newsletter was developed – and a Winter 2014 and a Spring 2015 newsletter has been sent out, and copies have also been circulated in the waiting rooms.
What were the results of the actions and what impact on patients and carers.	Better communication with patients about the services of the Practice
How was this publicised.	By email and in the waiting rooms.

Priority Area 3	
Describe the priority area:	Bid to NHS England Improvement Fund to enable the floor covering at the Surgery to be replaced.
Why was this priority identified:	General view held by patients that the flooring looks tired and is in need of replacement. Additionally, discussions about CQC requirements with the Patient Group.
What actions were taken to address this priority	The funding was secured, contractors were asked to quote, and the contract has been put in place for the works to be completed by 30 th June 2015 (due to the scale of the works involved)
What were the results of the actions and what	Enhanced ability of the Surgeries to manage any infection control issues that may arise.

impact on patients and carers.	
How was this publicised.	Notices in the waiting rooms
Progress on previous years	
If you have participated in this scheme for more than one year, outline progress made on the issues raised in the previous year (s)	
<p>In previous years we have had a focus on</p> <p>Patient Appointment booking service, and:</p> <ul style="list-style-type: none"> ○ We now release clinic rotas for up to 6 weeks in advance ○ Trialled telephone system call monitoring software to review our responsiveness to incoming calls. On average, telephone calls are answered within 5.6 seconds. The longest ring/call waiting time was 1 min 46 seconds, with 75% of calls being answered within 7 seconds. Generally speaking it was felt that this response standard was acceptable. ○ Promoted our ‘on-line’ appointment booking service more actively, and have seen a rise in registrations from 305 to 378. We will carry this forward into 2014. ○ Review our text message appointment reminder service policy <ul style="list-style-type: none"> ● Reviewed the Patient’s reception experience, and: <ul style="list-style-type: none"> ○ Allocated marked car park bays for both ordinary and disabled cars ○ Applied for a licence to enable the surgery to play appropriate/relaxing music in the reception areas in place of the TV screen. ○ Repainted the patient reception area in a more soothing/calming colour and in an eggshell finish to ensure that infection control standards can be maintained to CQC standards ○ Replaced the waiting room chairs to ensure that they are comfortable, appropriate for older patients and compliant with CQC requirements <p>Reviewed the Patient Forum Membership and:</p> <ul style="list-style-type: none"> ○ Extended an invitation to the RNID seeking a new member who is able to represent Nursing Home residents/Patients with disabilities – unfortunately a representative has not been nominated as yet. ○ Actively sought to recruit some new members, particularly in the age group 25-34 and 45-54 yrs – this remains an ongoing issue for 	

- us
- o Joined the National Association of Patient Participation (N.A.P.P.)

We believe that the activities that we have prioritised this year have built on the good works undertaken in previous years, and we remain very grateful to our Patient Group Members for the time and commitment that they have given to St Michaels and Beehive Surgeries.

PPG Sign Off	
Has the report been signed off by the PPG	Yes
What date was this report signed off:	31 st March 2015

How has the practice engaged with the PPG
<p>How has the practice made efforts to engage with seldom heard groups in the practice population?</p> <p>Inviting patients to sign up to the new Practice Newsletter Inviting Action on Hearing Loss to nominate a patient or their carer to join the group Openly publicising this forum on the practice website GPs asking patients to join the group</p>
<p>Has the practice received patient and carer feedback from a variety of sources</p> <p>Yes</p>

<p>How was the PPG involved the agreement of the priority areas and the resulting action plan?</p> <p>Discussion at a face to face meeting held on 15th September 2014 and by discussions with patients on an ongoing basis</p>
<p>How has the service offered to patients and carers improved as a result of the implementation of the action plan?</p> <p>Greater access to acute appointments; Better communications with Patients; Enhanced premises and greater infection control</p>
<p>Do you have any other comments about the PPF or practice in relation to this area of work?</p> <p>We will be looking at taking forward a 'Text Appointment Reminder Service' in the coming 12 months</p>
<p>Name of Individual Completing this Document: Michelle Creed</p>
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