

**Devon, Cornwall and Isles of Scilly Area Team  
2014/15 Patient Participation Enhanced Service – Reporting Template**

**Practice Name:** North Road West Medical Centre  
**Practice Code:** L83030

Signed on behalf of practice: 27<sup>th</sup> March 2015  
 Signed on behalf of PPG: Mr Allan Lloyd 27<sup>th</sup> March 2015

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

Does the Practice have a PPG? YES										
Method of engagement with PPG: Face to face, Email, Other (please specify) Our “face to face” group meets periodically throughout the year. In addition a virtual group is kept informed of matters discussed at the meeting by email and have the opportunity to comment.										
Number of members of PPG: Total: 45				Attending during 2014/15: 10						
Detail the gender mix of practice population and PPG:			Detail of age mix of practice population and PPG:							
	Male	Female								
%			<16	17-24	25-34	35-44	45-54	<b>55-64</b>	<b>65-74</b>	<b>&gt;75</b>
Practice	52.1	47.9	16.4	12.7	17.7	13.5	14.6	<b>11.6</b>	<b>7.1</b>	<b>6.4</b>
Practice			PRG	4.4	17.8	15.6	<b>28.9</b>	<b>31.1</b>	<b>2.2</b>	

PRG	44.4	55.6
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Although the total numbers favour female patients, those attending meetings regularly are predominantly male.

Detail the ethnic background of your practice population and PRG (of those for whom this data is held; 63% for practice as a whole but only 53% of group members):

	White				Mixed/ multiple ethnic groups			
	British	Irish	Gypsy or Irish traveller	Other white	White &black Caribbean	White &black African	White & Asian	Other mixed
Practice	2958	28	0	713	19	40	28	16
PRG	20			4				

	Asian/Asian British					Black/African/Caribbean/Black British			Other	
	Indian	Pakistani	Bangladeshi	Chinese	Other Asian	African	Caribbean	Other Black	Arab	Any other
Practice	29	8	3	105	97	85	5	0	1	0
PRG										

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: The group continues to be unrepresentative of younger age groups and non white/British groups. This is even more marked for those that attend meetings. Attempts to address this have been made through advertising the group both in the waiting room and on the practice website, even emphasising the need for representatives of specific groups. The opportunity to join the group is featured in our practice leaflet, made available to patients as they register. This will be discussed again by the group and further actions planned to address this in the coming year.

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. The practice has a fairly wide spread of ages, on average younger than the national average, patients having a predominantly white, mostly British, ethnic background (89% of those for whom we hold this

information). 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

Outline the sources of feedback that were reviewed during the year: Apart from discussion at the PPG itself, the suggestion box in the waiting room and ad hoc patient feedback, the practice introduced the “Friend and Family Test” during the year.

How frequently were these reviewed with the PRG? The group met once only in the year since the introduction of the “FFT”

1. Action plan priority areas and implementation

Priority area 1

Description of priority area: Ease of getting an appointment – a satisfaction score of only 75% was achieved in the previous year’s survey.

What actions were taken to address the priority? The 2013/14 report noted “Room for improvement. A lot depends on a person’s definition of

routine. If someone wants a specific time/date/doctor we cannot always oblige, but will always try to offer a reasonable alternative. Question is a bit ambiguous” and the associated action related to clarifying this in further surveys. The practice has also adapted the way requests for same day appointments are handled, increasing our capacity to call patients to discuss their needs so that they are directed to the most suitable clinician or provided with immediate help (e.g. advice or a prescription) over the phone. The PPG supported this development.

Result of actions and impact on patients and carers (including how publicised): We believe that patients requesting a same day appoint receive a call back from the practice more quickly than previously and that the impact of this is positive in terms of patient care. However, at present this has not been audited. Patients calling to request a same day appointment are advised of what to expect by way of call back etc as a matter of routine. This is also described in our patient leaflet.

## Priority area 2

Description of priority area: Use of on-line services. Only 52% of patients responding to the previous year’s survey were aware of the option to book appointments on-line.

What actions were taken to address the priority? The previous action plan required the practice to keep advertising this facility. It continues to be

featured in our practice leaflet and its presence on the practice's website has been upgraded. With the advent of on-line access to medical records this will be further enhanced and publicity for all on-line services (appointments, prescriptions and access to records) will be promoted in the coming months. Our website will also be upgraded to be more easily compatible with mobile devices (phones and tablets).

Result of actions and impact on patients and carers (including how publicised): As noted our on-line services are promoted via our leaflet and website as well as posters in the waiting room. The number of patients registered for on-line services has risen in the year to 1,066, up from only 774 in the last four months. The service appears popular with those that use it and its availability frees receptionist's time for those preferring face to face or telephone contact with the practice.

### Priority area 3

Description of priority area: Encouraging the use of text reminders for appointments. The previous year's survey found only 56% of respondents knew about this facility and the PPG suggested it be promoted and the impact assessed.

What actions were taken to address the priority? Registration for the text reminder service has been incorporated into the practice's registration pack so new patients are routinely invited to take advantage of the facility as they

register. It is promoted to existing patients via posters in the waiting room and reception staff will offer this to patients when a suitable opportunity arises in conversation with patients.

Result of actions and impact on patients and carers (including how publicised): The number of patients registered for the service has risen to 3,085 in the past year, almost half the total practice population. In the last full week 310 reminders were sent. This impact on missed appointments will be assessed for discussion at a PPG during 2015.

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 group is now well established. The issues addressed under priority areas 2 and 3 are relatively new developments for the practice, having been discussed with the PPG prior to introduction in 2013/14. The rapid progress in their uptake demonstrates the value of the PPG and practice working together on project such as these.

PPG Sign Off

Report signed off by PPG: YES Date of sign off: 27<sup>th</sup> 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?

- Membership of the group is advertised in various ways at the surgery

Has the practice received patient and carer feedback from a variety of sources?

- Yes

Was the PPG involved in the agreement of priority areas and the resulting action plan?

- Yes

How has the service offered to patients and carers improved as a result of the implementation of the action plan?

- Handling of requests for same day appointments has improved. Uptake of text reminders and on-line services has increased.

Do you have any other comments about the PPG or practice in relation to this area of work?

North Road West Medical Centre – Patient Participation LES Report for NEW Devon CCG March 2014

**ACTION PLAN AGREED WITH PATIENT PARTICIPATON GROUP at PPG meeting 4 March 2014**

	<b>Points arising from survey responses</b>	<b>Practice response from discussion with Patient Participation Group</b>	<b>Agreed Action after discussion with Patient Participation Group</b>
1	Are the receptionists helpful?Yes 97.5%	Practice is pleased with this result. The receptionists represent us incredibly well	<b>We will continue to provide the best service possible.</b>
2	Is it easy to get a routine appointment?Yes 75.5%	Room for improvement. A lot depends on a person's definition of routine. If someone wants a specific time/date/doctor we cannot always	<b>In next survey we will define what routine means and what is urgent(although that can be verysubjective).</b>

		oblige, but will always try to offer a reasonable alternative. Question is a bit ambiguous.	
3	Did you know you can see any doctor in the practice? (Although we do recommend seeing the same one each time to build up a relationship and help with the continuity of your care). Yes 93.9%	We have a good mix of male and female doctors and we pride ourselves on getting people seen on the day if the problem is urgent.	<b>We will continue to promote seeing the same doctor each time for routine appointments.</b>
4	Did you know that you can now book routine appointments on-line? (You can register for this service at reception or via our website <a href="http://www.northroadwest.co.uk">www.northroadwest.co.uk</a> ). Yes 52.1%	DE said that some patients worried that on line booking would mean that some receptionists would get sacked! This is not the case – the aim is to provide a convenient service for those who want to use it, and even if everyone used it, the receptionists would still be busy. On line	<b>Practice to keep advertising this facility.</b>

		booking also allows the facility to add details of why you wish to see the doctor.	
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	<b>Points arising from survey responses</b>	<b>Practice response from discussion with Patient Participation Group</b>	<b>Agreed Action after discussion with Patient Participation Group</b>
5	If you have tried the on-line booking facility, did you find it easy to use? Yes 75% (of the 28 patients who have used the facility).	Group members who have tried it said that the more you use it, the easier it becomes.	<b>Practice will try to flag up ways of making on line booking easier</b>
6	Did you know that we can send texts to your mobile phone to remind you about appointments? (Just tell the receptionist you	We are very keen to push this as it should help to reduce the number of patients	<b>Practice to continue promoting the service, then</b>

	<p>want to sign up to this when you book your next appointment).Yes 55.8%.</p>	<p>who DNA (Do Not Attend) appointments. Signing up for this is also a good way of checking that mobile phone numbers are up to date; many people no longer have a land line.</p>	<p><b>compare DNA rates before and after text reminders have been in wider use for 6 months or so.</b></p>
7	<p>Did you know that if a pharmacy is collecting your prescription, you need to allow an extra 2 days for your medication to be dispensed? (ie order your medication 4 days in advance)Yes 58.9% Action: Keep advertising and reminding patients.</p>	<p>Internally we aim to turn requests around within 48 hours but pharmacies do not collect from us every day and then need time afterwards to dispense medication.Practice attaches messages to patients to prescription counterfoil eg blood test required before next repeat. NC pointed out that if pharmacy collecting</p>	<p><b>Practice to put this (and details of practice 'comings and goings' into a 'News' slot on websitePractice to identify a better way of informing patients</b></p>

		and requesting scripts, patient does not get to see counterfoil and pharmacist does not pass on message.	
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	<b>Points arising from survey responses</b>	<b>Practice response from discussion with Patient Participation Group</b>	<b>Agreed Action after discussion with Patient Participation Group</b>
8	If you have Asthma or Epilepsy and your condition is stable, would you like to have your annual review conducted via the telephone, to save having to visit the surgery? Yes 65% (out of 37 pts who have asthma or epilepsy) .	For patients with chronic illnesses which are stable, taking time out to see the doctor and be told they are well, is a waste of their time and ours – particularly younger patients. However, a face to face	<b>Practice to go ahead with offering Remote Care Monitoring</b>

		<p>consultation is incredibly valuable for patients with lots of things going on. This would be an opt-in service very much for patients whose condition is stable. The computer system flags up people who do not appear to be taking their medication. Handfuls of prescriptions get wasted because patients fail to pick them up.</p>	
9	<p>Ethnicity/age of respondents Most were British or Irish, with only 10% being of other nationalities. Only 14% of respondents were under the age of 35.</p>	<p>Similarly, ethnic groups and younger people are under-represented in the PPG membership.</p>	<p><b>DE volunteered to canvass at Tamfu House next time we do a survey</b>(Chinese community with interpreter). <b>Look at timing of meetings</b>, as this suits/attracts</p>

			retired people but not those who are in work. <b>Consider taking a survey to Refugee Action where interpreters would be available. Look at ways of being more inclusive.</b>
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