

Derbyshire & Nottinghamshire Area Team

2014/15 Patient Participation Enhanced Service REPORT

Practice Name: Darley Dale Medical Centre

Practice Code: C81030

Signed on behalf of practice:



Date: 7/3/2015

Signed on behalf of PPG:

Sam J. Robins
Starley Dawson

Date: 7.3.2015

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

Does the Practice have a PPG? YES / NO

Method of engagement with PPG: Face to face, Email, Other (please specify)

Quarterly face to face meetings

Emails

Number of members of PPG: 24

Detail the gender mix of practice population and PPG:

%	Male	Female
Practice	49.7%	50.2%
PPG	33.3%	66.6%

Detail of age mix of practice population and PPG:

%	<16	17-24	25-34	35-44	45-54	55-64	65-74	> 75
Practice	15.6%	7.2	7.9	11.4	15	15.8	14.4	12.3
PPG	0	0	0	4	16.7	16.7	25	33.3

Detail the ethnic background of your practice population and PRG:

%	White				Mixed/ multiple ethnic groups			
	British	Irish	Gypsy or Irish traveller	Other white	White & black Caribbean	White & black African	White & Asian	Other mixed
Practice	58.1%	0.2%		1.6%	0.5%	0.2%	0.4%	0.4%
PPG	58.3			4				

%	Asian/Asian British					Black/African/Caribbean/Black British			Other	
	Indian	Pakistani	Bangladeshi	Chinese	Other Asian	African	Caribbean	Other Black	Arab	Any other
Practice	0.4%	0.2%			0.2%			0.1%		0.3%
PPG										

Not stated – 37.5% for both Practice population and PPG

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:

As noted above, the practice has more patients over the age of 35 years. When we have advertised to engage patients we have found patients in the age group over 65 have become involved in the PPG and it is more difficult to encourage the working well to

get involved. Our current PPG members are all patients and a number of the PPG members are carers.

In regards to our practice population our PPG has included patients which match most of the age range groups as a representative of the practice population. We do struggle to engage the under 44 population group and have tried this year to use social media to engage this group, although we have not had members join in the age range, we have reached a further 69 people and possibly more through people sharing post with friends and family.

In addition to social media we have updated our website to a more current, informative and user friendly page, we have noted since the launch in June 2014 it has had 37,867 visits to the page. Our website now has a feature to feedback to the practice online and this function has been used by patients to offer feedback to the practice.

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?

YES/NO

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

The practice population includes a larger population of patients who are either the working age group or elderly. Therefore the PPG is held in the evenings to avoid working hours for the population who find it difficult to attend during the day. In order to reach people who cannot attend the practice the PPG meeting notes are emailed to a larger group for feedback and discussion.

We have tried to engage the younger population and are now using other media sources such as Facebook and Twitter to get younger patients involved.

2. Review of patient feedback

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

- Health watch survey
- PPG survey
- CQC survey
- Friends and Family Survey
- PPG discussions
- Website feedback function

How frequently were these reviewed with the PRG?

At the quarterly face to face meetings.

3. Action plan priority areas and implementation

Priority area 1

Description of priority area:

Telephone appointments - to promote telephone appointments and improve access.

What actions were taken to address the priority?

- Telephone appointments were advertised via the telephone system when patients ring in to make appointments
- The practice website was updated with this information
- It was also advertised on patient prescriptions
- It was also noted on the patient check in screen and the Jayex patient call in screen
- We have displayed poster in our local Pharmacist around opening times
- We have also put all receptionist through training on patient care, booking appointments, patient service and this has been linked to all reception staff appraisal using the GP survey as a measurement
- The admin team are currently reviewing processes and setting best practice guidance to ensure consistency in delivering a quality service.

Result of actions and impact on patients and carers:

- Patient are now more aware of these telephone appointments and as a consequence it has been noted that there is an increase in telephone calls/ appointments.
- Easier access for patients, which at our recent review with our CCG it was noted that our access was good and we had a low rate of emergency admissions.
- There has also been a development made from this on to extended hours requirements, actions have already begun but more work is to be completed in this area. To date have increased the Nursing hours in our extended hours to include a HCA on an evening clinic and a nurse and HCA to complete an additional morning clinic. In May 2015 will be increasing this with a further nurse working a morning and evening clinic. The demand for this has been used and helps our working population either as a patient or carer to access services outside of their working hours.

How were these actions publicised?

This has been published in our waiting room under latest news and receptionists have been advertising our actions.

Priority area 2

Description of priority area:

Communication - to develop a social media profile to promote existing and new services

What actions were taken to address the priority?

Social media sites were set up for the practice via facebook and twitter.

We had two members of staff complete an apprenticeship in this area to ensure this is conducted in a professional manner. The aim of this is to progress with new ways of communication, looking at the next generation and how we can influence and manage their health care.

After discussions with our PPG they are in support of progressing in new ways of communication but would also like to maintain traditional ways such as posted letters.

A survey was completed for all patients to understand if they would benefit from having this and what sites they use the most to ensure we could reach our patients in this manner. The survey result did form part of the discussion with the PPG when discussing if there was a need for us to use this method of communication.

Result of actions and impact on patients and carers:

Helped engage the younger population and also gave more options for patients to access information regarding the practice. The facebook page helps promote in house clinics such as flu vaccination clinics and other themed health promotions. Our continuous development results are reflected in a GP survey results.

How were these actions publicised?

- Via leaflets in the surgery.
- Leaflets were initially attached to patients prescriptions to help promote the social media sites
- Posters were displayed in the surgery and sent over to the local chemist to help promote further
- It was also advertised on the practice website

Priority area 3

Description of priority area:

Communication- to update the current website and keep up to date

What actions were taken to address the priority?

A new practice website was designed to enable easier access for patients and also provide more functions – for example information on latest news.

The website has been advertising to sign up for the patient leaflet which will be emailed out quarterly with current practice news and our website shows how to be involved in our patient leaflet. The content of the leaflet was agreed in our PPG in January 2015 and will be launched in March 2015.

There are many more features on the new website that was not on the old. We have also got more online features such as travel requests and new registration that can be done at the patient convenience. The website has been used greatly since updated and has been visited 37867 times since June 2014.

Result of actions and impact on patients and carers:

- Ease of access for patients, clearly advertising opening times and use of our branch surgeries, which gives patients options.
- Helps target patients of the working / younger population who need easier access to the appointment system or prescription system. There is the system online function but an additional email function for patients to request prescriptions but have not thought about using system online. When using this it gives us the opportunity to advertise systemonline.
- The website is now more inviting and enables patients to access a large range of functions and information, our website has more facilities to track usage so we can see what has been successful in being communicated.

- Enables new patients to register online, an increased number of patients registering have used the online function.
- Patient can complete other online requests such as Travel and patient information updates, which allows them to do this at their convenience.

How were these actions publicised?

Via the surgery in the form of posters and leaflets

Through the social media sites

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):

In 2013/14 the following areas had been worked on with PPG group although our ANP left the practice late in 2014, we have recruited a new GP and are looking to work with DCHS to have a shared ANP in 2015. The principle of action one has remained the same but they are currently seen by a GP.

The second action has been continued and developed in regards to the access across three sites, this has been worked on as part of the review of our admin functions to ensure that the branch practice patients can speak with a receptionist to action requests outside of their practice hours.

Action one:

- **Required action:** Same day appointments.
- **Action completed:** Ring fenced Advanced Nurse Practitioner appointed, for same day appointments.
- **Impact:** has been a large number of same day appointments are available. Although the impact has not been seen on the results of this survey, it was suggested in the PRG and managers meetings this may be the wording of the questions and the understanding of the advanced nurse practitioner.

Action Two:

- **Required action:** Publicity of appointments at other sites.
- **Action completed:** this is now offered during conversations when booking appointments.
- **Impact:** increased movement around surgeries has been noticed especially if someone wants to see a particular clinician

4. PPG Sign Off

Report signed off by PPG: YES

Date of sign off: 7.03.2015

How has the practice engaged with the PPG:

How has the practice made efforts to engage with seldom heard groups in the practice population?

The practice has used social media to include other groups in the practice population such as younger patients, which are a harder group to reach, so this year we have tried to use more current forms of communication.

This has included Facebook and Twitter; we started this in 2014 and are currently building up a following to be able to use this as an effective communication tool.

Our PPG does meet quarterly and this year we have introduced communication via email with our PPG member that attend the meeting but also to capture people who cannot attend the meeting. All meeting notes go out via email and in the practice waiting room which gives anyone not registered with the PPG the opportunity to feedback to the practice.

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

We have conducted patient in house surveys, had two CQC visits and we invited health watch to visit which provided feedback to the practice in which we acted on. The main areas raised were around signage at Darley Dale, which we have reviewed. All other feedback has been positive so we have been looking at creative ways to continue developing the practice, as seen in the actions above.

These have been:

- *Reviewing back office functions across three sites, centralising work to improve efficiency so we can invest more time in front line services for the patients and offer a quality service to patients at point of entry.*
- *Recruiting two trainers to complete inductions for new staff and support management in training requirements that are highlighted in 121s for clinical and non clinical staff.*
- *Recruited a team manager that conducts regular 121s to develop non clinical staff and is a front line point of contact.*
- *Conducted training for all non clinical staff on best practice receptionist skills to improve patient experience.*

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

The priority areas had been set with the PPG at the Beginning of 2014 and reviewed in the summer of 2014 with the PPG which reviewed current state and had full involvement in deciding the website layout and a discussion was held around a variety of communication methods that would suit the young and older population groups. We also engaged the PPG in the review we had been completing across our admin function over our 3 sites and how to improve our reception service and increase efficiency.

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

This year we have seen an increase in our population size and remained in achieving good access for patients which reflects in our GP survey and our emergency admissions data that is supplied to us by the CCG.

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

We have a passionate community and our PPG are very supportive of the practice and this was demonstrated in PPG meetings and support during our Health watch and CQC visits this year.

Please submit completed report to the Area Team via email no later than 31 March 2015 to:

- Derbyshire practices: e.derbyshirenottinghamshire-gpderbys@nhs.net
- Nottinghamshire practices: e.derbyshirenottinghamshire-gpnotts@nhs.net