Standard Reporting Template

Devon, Cornwall and Isles of Scilly Area Team

2014/15 Patient Participation Enhanced Service – Reporting Template

Practice Name: Wembury Surgery

Practice Code: L83639

Signed on behalf of practice: Sarah Williams Date: 19th March 2015

Signed on behalf of PPG: John Squire (Chair) Date: 23rd 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. | |
| Number of members of PPG: 10 | |
| Detail the gender mix of practice population and PPG:   |  |  |  | | --- | --- | --- | | % | Male | Female | | Practice | 48% | 52% | | PRG | 50% | 50% | | Detail of age mix of practice population and PPG:   |  |  |  |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | --- | --- | --- | | % | <16 | 17-24 | 25-34 | 35-44 | 45-54 | 55-64 | 65-74 | > 75 | | Practice | 14% | 6% | 6% | 10% | 14% | 15% | 20% | 15% | | PRG |  |  | 10% | 10% |  | 10% | 50% | 20% | |
| 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 | 99.55% | 0.05% |  |  | 0.05% | 0.05% | 0.05% |  | | PRG | 100% |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | |  | Asian/Asian British | | | | | Black/African/Caribbean/Black British | | | Other | | |  | Indian | Pakistani | Bangladeshi | Chinese | Other  Asian | African | Caribbean | Other Black | Arab | Any other | | Practice |  | 0.05% |  |  | 0.15% |  |  |  |  |  | | 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:  Using the NHS England Primary Care Web Tool Demographics profile and our own local knowledge we identified that our Practice has a high number of patients in the 65-74 age range. The practice has very few ethnic minority patients and no social deprivation. Our PPG is a 50/50 ratio of male and female members which is representative of our practice profile with the majority of members in the 65-74 age range. Members have been sought by advertising on our website and in our quarterly newsletter. We also include an invitation in our New Patient Pack and have raised awareness at a PPG stall at the local primary school Summer Fair. Within the group there is individual representation of the housebound, learning disabilities, the elderly, carers and working families. | |
| 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: N/A | |

1. Review of patient feedback

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| Outline the sources of feedback that were reviewed during the year:   * During the year we ran a CFEP survey which gave patients the opportunity to comment on the service we provide and suggest ways to improve our service. * A comments and suggestion box is available in the reception area. * Our website, patient leaflet and newsletter ask patients to contact us with any comments or suggestions they may have about the service we provide. * The Friends and Family test offers the patients the facility to rate our services and offer further comments. * Members of the PPG attended a Flu clinic in September to meet with patients and discuss areas for improvement and encourage membership   The PPG have a dedicated area on the notice board where their names and contact details are displayed for patients to see and contact if they wish. |
| How frequently were these reviewed with the PRG? Quarterly |

1. Action plan priority areas and implementation

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| Priority area 1 |
| Description of priority area: Confidentiality  The issue of confidentiality in the waiting room was raised through the CFEP survey. |
| What actions were taken to address the priority?  Research into methods of improving confidentiality in the waiting room was investigated. A reconfiguration of the waiting room reception desk has been considered but this is not deemed practical. Clearer signage in the reception area and dispensary has been implemented to ensure patients are aware of areas they can speak confidentially. For example, patients are offered the opportunity to speak to a member of staff in the privacy of another room away from the reception area.  A suggestion box asking for ideas on improving confidentiality is available in reception which was promoted in the newsletter.  Staff training implemented to highlight how to handle telephone calls without divulging confidential patient information. |
| Result of actions and impact on patients and carers (including how publicised):  Although offered, patients have generally not requested to speak to a member of staff in a private room. The recent CQC inspection observed staff and noted that they were careful to follow basic precautions when discussing patients’ treatments in order that confidential information was kept private. Patients’ feedback on comment cards and in discussions suggested that they felt that their privacy and dignity was upheld.  The result of this action are publicised on the patient information board. |

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| Priority area 2 |
| Description of priority area: Service Information  Comments from patients suggested that there was some confusion over types of clinics offered and who was eligible. There is a need for clearer information to be given to patients re clinics that the surgery offers in order to meet the needs of different groups within the surgery. |
| What actions were taken to address the priority?   * Information about clinics offered was put in the Quarterly Newsletter, the web site was also updated to include clearer guidelines on services available. * A notice board dedicated to Carers was displayed prominently in the waiting room. * A leaflet directed specifically to young people, given out at the point of registration. * Posters and leaflets available in reception signposting patients to support groups and organisations in the area. |
| Result of actions and impact on patients and carers (including how publicised):  Patients’ are more aware of services available and there is a good uptake from patients for clinics such as Chronic Disease Management, NHS Health Checks, Carers clinics, Smoking Cessation and Immunisation Clinics.  The result of this action are publicised on the patient information board. |
| Priority area 3 |
| Description of priority area: Ease of Access to Appointments  Comments from a few patients suggested that there was some frustration over booking appointments. |
| What actions were taken to address the priority?  In November we had an independent audit conducted – the GP Access System Review, to assess how well we are meeting patient demand and how we can be more effective in terms of efficiency and productivity. The results of the audit highlighted areas of high demand and clinics were restructured to accommodate this. |
| Result of actions and impact on patients and carers (including how publicised):  Feedback from the national patient survey suggested patients were seen quickly when they needed an appointment.  The result of this action are publicised on the patient information board. |

Progress on previous years

Progress has been made in improving the communication between the surgery and young people.

A section for young people was introduced on the website.

The ability to book a telephone consultation on line is now available as requested

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

1. PPG Sign Off

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| Report signed off by PPG: Yes  Date of sign off: 23rd March 2015 |
| How has the practice engaged with the PPG: Email and face to face  How has the practice made efforts to engage with seldom heard groups in the practice population? Advertised through a number of methods in order to reach as many of the practice population as possible.  Has the practice received patient and carer feedback from a variety of sources? Yes, see above – comments, surveys, friends and family test.  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? More information is available to patients on a variety of media including improved leaflets, information on the website and improved posters in the surgery.  Do you have any other comments about the PPG or practice in relation to this area of work?  We have only recently received the CQC report which we intend to discuss at the next PPG meeting and continue to build on the 5 service areas to maintain and hopefully exceed the overall rating of ‘Good’ in each area. |