Standard Reporting Template

Bristol, North Somerset, Somerset and South Gloucestershire Area Team 2014/15 Patient Participation Enhanced Service – Reporting Template

Practice Name: Cannington Health Centre

Practice Code: L85018

Signed on behalf of practice: Moira Allen, Practice Manager Date: 30.1.15

Signed on behalf of PPG: Susan Whytock, PPG chair Date: 30.1.15

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

Does the Practice have a PPG and/or PRG?

The practice has both a 'real' PPG and a 'virtual' PPG. We refer to them as the Core Patient Group and the On-line Patient Group

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

Core PG – face to face and email. We have regular meetings, approximately every 8 weeks attended by the practice manager from the practice On-line PG – email but they have an open invitation to attend the core group meetings in person

Number of members of PPG and/or PRG:

Detail the gender mix of practice population and PPG and/or PRG: As at 10.3.15

%	Male	Female
Practice	50.38	49.62
Core PPG	57.14	42.86
On-line PPG	39.47	60.53

Detail of age mix of practice population and PPG and/or PRG: As at 10.3.15

%	<16	17-24	25-34	35-44	45-54	55-64	65-74	> 75
Practice	17.7	9.5	8.2	9.9	15.23	14.48	13.8	11.4
Core PPG						42.8	42.8	14.4
On-line	0.4	3.8	12.4	13.2	16.5	18.8	22.6	12.3

Detail the ethnic background of your practice population and PPG and/or PRG:

We do not collect ethnicity data for our practice population. We know the ethnicity of the Core PPG but not the on-line group although we do know that we have signed up members from 'non-white' and 'non-British' ethnic groups.

As a proxy for the practice we have used the 2011 Census data for Cannington & Wembdon

	White				Mixed/ multiple ethnic groups				
%	British	Irish	Gypsy or Irish traveller	Other white	White &black Caribbean	White &black African	White &Asian	Other mixed	
Practice Proxy	96.6	0.4	0.1	1.8	0.2	0.02	0.2	0.3	
PPG	100%								

	Asian/Asian British						Black/African/Caribbean/Black British			Other	
%	Indian	Pakistani	Bangladeshi	Chinese	Other Asian	African	Caribbean	Other Black	Arab	Any other	
Practice Proxy	0.02	0.1	0	0.04	0.04	0	0	0	0.02	0.04	
PPG											

Gender

The **practice** population split is roughly 50:50 male:female

Core group

Of the 7 members, 3 are female and 4 are male. The percentage figures look out of balance but this is because of the small number

of members. This is the first time since the group started in 2004 that men have outnumbered women in the group.

On-line group

The membership is roughly 40:60, male to female. This is not unreasonable given that women are known to take a greater interest in health matters and are more frequent attenders at the surgery.

Age

The core group membership is entirely over the age of 55. This is perhaps not surprising given that this age group is the one with a greater personal interest in health and the time to offer to a voluntary group.

The on-line group has a membership covering the entire age range which is an improvement on the core group. The percentage in each age group rises with age, again reflecting the increase in a personal interest in health as we age.

Ethnic background

We do not collect ethnicity data for our practice population.

We have examined census data for the areas of Cannington + Wembdon and Quantocks which cover most of the practice area.

The data in the table above is for Cannington + Wembdon and the data for Quantocks was very similar (97.1% White British).

There are no significant ethnic groups that we should perhaps be targeting to ensure representative membership. Even if our on-line group were entirely White British (and we can tell from the names of members that it is not), it would not be unrepresentative of the practice population as a whole.

Describe steps taken to ensure that the PPG and/or PRG is representative of the practice population in terms of gender, age and ethnic background and other members of the practice population:

Basically we rely on the on-line group to provide a representative membership

We are satisfied that gender and ethnic background are reasonably represented.

We accept that the core PPG is clearly not representative by age. We have tried to compensate for this by expanding our on-line patient group. In 2013/14 the PPG ran a very successful recruitment campaign for the on-line group which kick-started the group. Membership stood at 159 as at March 2014 and as at now (10.3.15) has reached 266 and includes patients from all age groups.

All patients are invited to join the on-line group when they register with the practice. This invitation obviously matches the profile of patients joining the practice and helps to ensure broad representation.

There is prominent publicity in the waiting room and elsewhere about the on-line group and each newsletter reminds patients of its existence. Our chair has given a presentation to other PPG chairs about the creation and development of our on-line group. On-line patient group members are invited to attend core group committee meetings. This has helped to energise the core group and although they have not gone on to join the core group, younger members of the on-line group have attended committee meetings.

Are there any specific characteristics of your practice population which means that other groups should be included in the PPG and/or PRG?

e.g. a large student population, significant number of jobseekers, large numbers of nursing homes, or a LGBT community?

No. Although the village is home to Cannington Centre, part of Bridgwater College, few of the students are resident and so there is no significant number registered with the practice.

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

Review of patient feedback

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

- Friends and Family test (from 1.10.14)
- Continuing to follow up the results of the 2013/14 patient survey
- National patient survey(latest data as available)
- Feedback relating to specific topics brought to each meeting by PPG members and the practice

How frequently were these reviewed with the PPG and/or PRG?

Feedback is a standing item on PPG agenda so there are opportunities to review feedback every 2 months

- Friends and Family test -
 - 0 18.11.14
 - 0 13.1.15
 - 0 10.3.15
- Feedback from core and on-line patient groups
 - All PPG meetings (7 in year)
- Continuing to follow up the results of the 2013/14 patient survey
 - 0 21.5.14
 - 0 23.7.14
- National patient survey
 - o By email 15.1.15
 - 0 10.3.15
- Feedback relating to specific topics
 - o Website 13.1.15 & 10.3.15
 - o Patient leaflet 10.3.15

Action plan priority areas and implementation

No clear trends emerged from the Friends and Family Test results in the time available and there was no obvious priority identified from the national GP survey. The core PPG chose to concentrate on improving communication between the practice and patients which in turn would facilitate and encourage patient feedback in future

Priority Area 1

Description of priority area:

Improve practice website with particular reference to

- Patient group pages
- Having an on-line suggestion box
- Increasing the number of forms available to complete or download from the website

What actions were taken to address the priority?

- Surveyed on-line group 'If you could change one thing about our website (www.cannington.gpsurgery.net), what would that be?' and invited other comments about the website
- Discussed results at core group meeting
- Practice, PPG chair and website provider worked together to re-launch website
- New website went live 1.2.15 and at the same time we launched on-line patient access to medical records and for repeat prescription ordering

Result of actions and impact on patients and carers (including how publicised):

- Practice and PPG are still not satisfied with the website and are continuing to work to improve it
- Comments received by practice about the website have been favourable
- Publicised by posters and on repeat prescription order slips
- The practice has responded to the 2 patients so far who have made suggestions via the website

Priority Area 2

Description of priority area:

Provide patients with a leaflet to assist them to get the most out of their consultation

What actions were taken to address the priority?

- Practice manager drafted leaflet in consultation with core PPG members
- Revised and approved by core patient group and practice
- Copy sent to a sample of 20 patients with forthcoming appointments asking for feedback on the content of the leaflet and how useful it was in their consultation
- Respondents reported that it was a well written, potentially useful leaflet

Result of actions and impact on patients and carers (including how publicised):

- Leaflet made available in the practice and on the practice website
- Publicised within the practice and to the on-line group
- Longer term feedback will be necessary to determine impact

Priority Area 3

Description of priority area:

Although there were many more positive comments about reception staff via the Friends and Family Test and other feedback, the practice did occasionally receive negative feedback about reception staff. The core PPG did not believe this was a major problem but asked the practice to look at ways to improve the 'customer service' ethos of the reception team.

What actions were taken to address the priority?

- Although the practice provided name badges, staff had become lax about wearing them and several badges had been lost. The practice ensured that all staff (not just reception staff) had a name badge and that frontline staff wore their name badge at all times
- The assistant to the practice manager was given the responsibility of managing the reception team and her brief was to improve customer service
- Reception staff themselves had been lobbying for a uniform because they believed it would provide a more professional image and it would help patients identify which staff were actually working on reception (as opposed to those who might be working in the reception office area but not actually on duty as receptionists). This had for various reasons been resisted by the practice and patient group but in order to show support for the reception team and to encourage professionalism, reception staff chose a uniform blouse and since January 2015 all staff on reception duty have worn their uniform

Result of actions and impact on patients and carers (including how publicised):

- Patients are now able to clearly identify reception staff
 - o individually by name (name badge)
 - o as a reception team member (by uniform)
- Reception staff have a clearer sense of team identity
- Publicity was self-evident
- The impact on patients is hard to assess but the core PPG will continue to monitor the results of the FFT and other feedback for evidence of the impact

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):

PPG plan	Progress
Reorganise the notice boards to improve their usefulness	
Group member to assist practice with displays	Completed
Plasma screen in waiting room would improve provision for waiting patients	Installation starting 11.3.15
Publicise the website more to improve access to information for people who do not often come into the	Article in parish magazine
health centre	PPG members helped to distribute practice newsletter to locations outside the health centre
PPG members to feedback to practice if they become aware of instances when practice staff could have	Standing item on PPG agenda
been more informative	
Place a copy of the current practice leaflet in the leaflet rack so patients can take an updated copy	1.5.14
Develop the website so that it becomes a comprehensive and user friendly source of information	Continued into plan for 2014/15
Start with the PPG pages	New website went live 1.2.15
Major revision of the site	
Improve on line access for prescription ordering and other services after the clinical system has been	Live from 1.2.15
upgraded in October 2014	
In addition to the above actions, PPG members will	Start with next newsletter i.e. by 31.3.14
assist in the production and distribution of the newsletter	PPG members made contributions to several newsletters and assisted in the distribution
continue to recruit patients to the on line group	Commitments of the PPG prevented a second major recruitment drive in person but membership has increased by over 60% in year
	Continued in 2014/15 plan
Assist the practice manager and clinicians to produce a patient leaflet to help patients get the most out of	Leaflet approved by practice and PPG in January 2015
their consultations.	Piloted with Feedback in February 2015
	Leaflet made available March 2015
Pilot the leaflet and assess its usefulness	
If useful, launch the leaflet	
For the next survey, PPG members will assist with collecting responses directly from patients which	Next survey period
should improve uptake and also provide responses from people with poor vision or who are unable to read	

• PPG Sign Off

Report signed off by PPG and/or PRG: YES

Date of sign off: 30.3.2015

How has the practice engaged with the PPG and/or PRG:

Regularly throughout the year by meetings, working groups, email, telephone calls

How has the practice made efforts to engage with seldom heard groups in the practice population? By developing the on-line group

Has the practice received patient and carer feedback from a variety of sources? Yes as detailed in the report

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?

- The website is now more attractive and contains a statement of the ethos of the practice. It will allow us to increase the PPG relevant content and other information of value to patients.
- Early feedback from patients indicates that whilst many patients already feel competent speaking to their GP, the leaflet did prompt an improvement in the dialogue.
- Patients can identify and put a name to members of the reception team making it a more personalised service.

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

From discussions with other PPGs across Somerset, I would say that our practice is particularly open and encouraging of new ideas or suggestions from patients for improvement. Although we would rate the practice highly in the first place, the challenge is where it requires additional workload on an already stretched practice team. We have plans agreed but we understand that we may have to wait sometimes for them to come to fruition.