

Annex D: Standard Reporting Template

NHS Greater Manchester
2014/15 Patient Participation Enhanced Service – Reporting Template

Practice Name: Dalefield Surgery

Practice Code: P82010

Signed on behalf of practice: Marie Bryan Date: 18th March 2015

Signed on behalf of PPG: Date: 25th 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) face to face & Post																																					
Number of members of PPG: 12																																					
Detail the gender mix of practice population and PPG: <table border="1" style="margin-left: 20px; border-collapse: collapse; width: 80%;"> <thead> <tr> <th style="width: 15%;">%</th> <th style="width: 30%;">Male</th> <th style="width: 30%;">Female</th> </tr> </thead> <tbody> <tr> <td>Practice</td> <td style="text-align: center;">51</td> <td style="text-align: center;">49</td> </tr> <tr> <td>PRG</td> <td style="text-align: center;">50</td> <td style="text-align: center;">50</td> </tr> </tbody> </table>	%	Male	Female	Practice	51	49	PRG	50	50	Detail of age mix of practice population and PPG: <table border="1" style="margin-left: 20px; border-collapse: collapse; width: 90%;"> <thead> <tr> <th style="width: 10%;">%</th> <th style="width: 10%;"><16</th> <th style="width: 10%;">17-24</th> <th style="width: 10%;">25-34</th> <th style="width: 10%;">35-44</th> <th style="width: 10%;">45-54</th> <th style="width: 10%;">55-64</th> <th style="width: 10%;">65-74</th> <th style="width: 10%;">> 75</th> </tr> </thead> <tbody> <tr> <td>Practice</td> <td style="text-align: center;">23</td> <td style="text-align: center;">9</td> <td style="text-align: center;">14</td> <td style="text-align: center;">12</td> <td style="text-align: center;">13</td> <td style="text-align: center;">11</td> <td style="text-align: center;">10</td> <td style="text-align: center;">9</td> </tr> <tr> <td>PRG</td> <td style="text-align: center;">0</td> <td style="text-align: center;">0</td> <td style="text-align: center;">0</td> <td style="text-align: center;">17</td> <td style="text-align: center;">8</td> <td style="text-align: center;">25</td> <td style="text-align: center;">33</td> <td style="text-align: center;">17</td> </tr> </tbody> </table>	%	<16	17-24	25-34	35-44	45-54	55-64	65-74	> 75	Practice	23	9	14	12	13	11	10	9	PRG	0	0	0	17	8	25	33	17
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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	93.08							6.92
PRG	80							20

	Asian/Asian British					Black/African/Caribbean/Black British			Other	
	Indian	Pakistani	Bangladeshi	Chinese	Other Asian	African	Caribbean	Other Black	Arab	Any other
Practice										
PRG		2								

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:

Percentage figures of ethnic background of patient population are taken from Primary Care Web tool.

The patients on the Patient Participation Group list represent a cross section of our patient population including ethnicity, various age groups and chronic disease areas. However in order to encourage categories of patients not represented the practice periodically sends out an attached compliment slip inviting patients to join the PPG in recall letters and attached to repeat prescriptions sent out/collected from the surgery. The group has attempted to vary days and times of the meetings, ie early evening for working patients and afternoon for elderly population who would not wish to come out after dark in order to enable the different categories to attend. Clinicians have been proactive in raising the PPG with patients with specific diseases in order to gain representation in these areas.

Patients who have expressed an interest to reception, clinicians or the Practice Manager have been contacted and invited to the next meeting. During the call they have been asked to either visit the website for previous information or we can send hard copy. All minutes and action plans discussed at meetings are uploaded to the website. The Terms of Reference for the Group were discussed and agreed by patients present at the meeting in December 2011, these can be viewed on the website.

Dalefield Surgery has a dedicated notice board in the waiting room advising patients of the PPG, it advertises the date of the next meeting and advising how to attend and/or ask for further details. The PPG has its own page on the website where patients can access minutes of previous meetings, the current action plan and the Year End report the Practice Survey is also accessible to all patients via the website.

The practice has a permanent slot in the Practice newsletter advising the date of the next meeting date and also advising how to ask for further details. These newsletters are also stored on the website for access and are sent out to all patients who have subscribed to have it automatically sent to their personal e-mail addresses. Patient Newsletters are printed 20 at a time for the waiting room and reprinted 3 - 4 times a month in order to keep up with demand.

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:

2. Review of patient feedback

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

Annual Patient Survey
Friends & Family replies
Patient Suggestions

How frequently were these reviewed with the PRG?

Our PPG meets 4 times per year (every quarter) with those members available. Depending on the timing of the meeting would determine what was discussed. Members who are not at the meeting are advised as soon as possible of the date of the next meeting via their preferred route ie text/e-mail/post.

The actions agreed at the meetings are at various stages and can be viewed on the website. These can also be printed in hard copy for those patients who request them.

For example;

QTR 1 would usually be discussing the results of the patient survey that had been circulated to patients during a specific time period in QTR4 and what actions the practice would focus on in QTRs 2 & 3.

QTR 3 we would agree what questions, if any, to change in the in-house patient survey, it had been previously agreed to continue with the existing questions in order to provide comparable evidence, however this year we have delayed due to the re-furbishment that started in the Health Centre in December 2014. Although we are not required to run the internal patient survey with the introduction of the Friends and Family test, the PPG were keen to have information other than the national patient survey. Due to this decision the patient survey will be run in QTR 2 (Sept/Oct 2015)

In the January 2015 meeting we had a discussion on FFT submissions of which comments made were all of a positive nature. Patient suggestions are done at each meeting, if any had been submitted into appropriate boxes in the waiting area.

3. Action plan priority areas and implementation

Priority area 1
<p>Description of priority area:</p> <p>Patient access</p>
<p>What actions were taken to address the priority?</p> <p>Discussions on patient access had been addressed over the past few years, with improving results being recorded on the internal patient survey. Clinical and administration staff hours have been added to in order to provide necessary service/skills to our ever expanding patient list size. The practice had been part of the CCG/PCF initiative that looks at the provision of urgent/on the day appointments and pre-bookable.</p>
<p>Result of actions and impact on patients and carers (including how publicised):</p> <p>Appointments offered at the surgery had been tempered over the past two years to meet demands of patients, along with the extended hours' provision. The appointments now on offer reflect intensive research on providing the best for our patients.</p> <p>Pre-bookable appointments 12 weeks in advance for all Clinicians, including HCAs and Practice Nurse. This is especially important to carers and working patients who can plan their appointments around commitments.</p> <p>On the day appointments with all GPs</p> <p>On-line appointments can be booked with all GPs</p> <p>Telephone consultations with all GPs and Practice Nurse</p> <p>Late night appointments are now available with the Practice Nurse at the same time as the extended hours' provisions in order to</p>

facilitate working people and carers.

Early appointments (8am) will be available with HCAs from 1st April after discussion with the PPG.

All the improvements to the appointments and patient access to the surgery have been published on the website on relevant pages. The Practice newsletter has a dedicated slot each edition advising patients on how to book/cancel an appointment. The surgery has extensively promoted on line appointments and repeat prescriptions this year. Patients being able to see their personal data in journals will be available from 1st April 2015, again this has been extensively advertised in waiting area, newsletters and website.

Priority area 2

Description of priority area:

Health Centre

What actions were taken to address the priority?

Health Centre Refurbishment/rebuild: Most of the comments received in the patient suggestion box over the past years has been regarding the poor condition of the Health Centre. The refurbishments started with the clinical rooms been given new flooring at the beginning of 2014. A more extensive refurbishment had been in the pipeline for several years and finally started in December 2014. The PPG have made suggestions as to possible improvements to the waiting area that they felt would improve the patient pathway through the Health Centre.

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

Health Centre Refurbishment/rebuild: The Health Centre is underway with the refurbishments. This is a 26 week programme and

will not be complete until June/July 2015. PPG input and suggestions were taken to the pre-build meeting. Issues like entrance to include better access for disabled people and chairs with arms have been taken into consideration.

Priority area 3

Description of priority area: Promotion of different areas of NHS/Community Services

What actions were taken to address the priority?

The patient survey indicated a slight improvement in the number of patients aware of other services within the NHs and the Community/Public Health.

Increased promotion in the waiting area has been given to:

- Carers (dedicated Board),
- on line services,
- targeted promotions, ie Cancer/smoking cessation
- Prescribing – cost of medications in Bolton
- Appropriate services for patient to attend when feeling unwell
- Healthwatch

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

Focused promotions and dedicated noticeboards in the waiting area, newsletters and website have increased awareness of challenging areas in Bolton. This will hopefully have an impact on the overall services of the NHS, Community and Public Health.

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):

Patient Questionnaire devised alongside practice staff and PPG members has enabled us to focus on areas for improvement and compare year on year data. Patient access, other services available in the NHS, repeat prescriptions process etc.

Working with on a CCG/PCF initiative we were able to take to the PPG various ideas surrounding the appointments allocation of pre bookable and on the day. Discussion with PPG and implementation of more pre bookable appointments has led to an increase in patients being able to access the surgeries services more appropriately. The introduction of telephone triage for all clinicians in each session has been a major hit, people no longer have to attend surgery, therefore freeing appointments for those who do need to be seen.

The PPG and Practice Manager discussion on what should be included in the newsletter that is circulated to patients. The introduction of a new website has enabled this newsletter and the patient survey to be distributed to a wider patients list.

Continuation of the text message service for pre booked appointments was agreed with the PPG. They felt that this was a very useful service in order to avoid patient none attendance for appointments.

4. PPG Sign Off

Report signed off by PPG:

Date of sign off: 25th March 2015

Due to the PPG not meeting until May 2015, the annual report has been sent out to members for comment/changes/additions. Members have confirmed no alterations necessary. Members have been asked to bring the signed off copies to the next meeting

How has the practice engaged with the PPG:

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

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

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

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

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

Dates of PPG meetings are posted on both the website and on the dedicated board in the waiting area. They are also on the newsletter that is also sent out via the website to all patients who have requested it and copies available in the waiting area and on reception. Clinicians mention to patients of areas not already represented on the PPG of the fact that we meet to discuss and welcome their input to the future services of the surgery.

The PPG takes results from the internal patient survey, national patient survey, FFT and patient suggestions slips that are available in the waiting area for all patients to complete. These services are also available on the website.

The PPG is involved in discussing key points in patient access to the surgery, how to get messages across to the wider patient list and involvement in the questions asked in the patient survey and action plan on the results of outcomes of the survey. This has allowed the practice to best serve its patients with mutually beneficial arrangements.

Our dedicated boards in the waiting area and on our website for both Carers and PPG allow patients to obtain direction in which best to access the service(s) they need.

Our PPG recently met with CQC Inspectors at our Practice Inspection in December 2104. The CQC discuss with members of the PPG what input they have had in decisions made by the surgery and the positive effects for both practice staff and patients alike. Our CQC Report can be viewed on our website.