

Annex D: Standard Reporting Template

[Name] Area Team
2014/15 Patient Participation Enhanced Service – Reporting Template

Practice Name: Drs Collins, Carragher & Neal

Practice Code: E81061

Signed on behalf of practice: Jill Watson Date: 20th March 2015

Signed on behalf of PPG: Raymond Hopwood

Date: 20th 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											
Number of members of PPG: 8											
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	55-64	65-74	> 75
Practice	2623	2561	Practice	1109	373	544	706	904	685	500	363
PRG	3	5	PRG					1	3	2	2

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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	We do not have the ethnicity of all our patients recorded							
PRG	8							

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

We advertise on our website, in our newsletters, on Facebook and twitter to try to recruit new members to our group. We also have sent leaflets to the local primary school and playgroup to try to recruit some younger people. We attach leaflets to repeat prescriptions on a regular basis to try to recruit new members.

The PPG were very keen to encourage younger patients to join the PPG. Firstly the PPG was advertised on Facebook and twitter and one of the PPG members went to the local primary school to see if it would be possible to have a stall at the school Christmas fair. We felt that by having a stand at the fair we could advertise what the groups aims and ambitions are and that this may encourage some younger parents to join. We also advertise on our website for patients to join the virtual group. As we are a relatively new PPG our chairman attends the bi-monthly meetings of the locality PPG chairpersons meetings to keep up with what is going on in the locality and to find how other PPG's work and how it may benefit us.

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

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

In our catchment area we have RAF Henlow and therefore have families of the military registered here. These families often have more complex requirements due to the fact they are isolated from their families and the husbands/wives are away overseas for several months at a time. We have made concerted efforts to involve these patients in the PPG via advertising in the local RAF magazine but as of yet have had no response. We will continue to try to encourage participation from them.

2. Review of patient feedback

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

GP Survey
Friends and Family Test
Feedback from PPG

How frequently were these reviewed with the PRG?

Annually

3. Action plan priority areas and implementation

Priority area 1

Description of priority area:

1. To increase email communication with patients and also text messaging.

What actions were taken to address the priority?

The surgery has made a very determined effort in the past 12 months to collect mobile telephone numbers and email addresses from patients. We have put up posters in the surgery and also attached flyers to prescriptions.

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

We can now email many more patients if necessary and also our DNA rates have dropped as we have sent reminders of appointments via text messages. We realised when the text messaging reminder service was out of action for a week recently that many patients rely on this to come to their appointments. We will continue to advertise for patients to update their records in the coming year.

Priority area 2

Description of priority area:

To increase number of pre-bookable appointments and also to increase the amount of patients booking appointments and ordering prescriptions online.

What actions were taken to address the priority?

The PPG felt that that the surgery did not always have enough pre-bookable appointments available therefore the practice have set up a system whereby there are always appointments available to book up to thirteen weeks ahead which helps patients who have regular appointments and also the patients who need to see the nurse for appointments such as INR or regular injections. The surgery has employed another GP to improve the availability of appointments. All four of the doctors now have appointments available to book up to thirteen weeks ahead.

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

Patient satisfaction has increased as people who work or have to arrange lifts to the surgery can now book well in advance. Two thirds of appointments are now bookable up to thirteen weeks in advance either by telephone or online. The extended hours appointments are also available to be booked in this way. This has taken some of the pressure off the telephones in the morning. We are still advertising on the website and in the surgery this information.

Priority area 3

Description of priority area:

To discourage patients from attending A&E departments in line with the CCG priority.

What actions were taken to address the priority?

We have advertised via posters in the surgery and also put notices on the website and Facebook to encourage patients to contact the surgery in the first instance during surgery opening hours and to contact 111 or the out of hours service if the surgery is closed.

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

We are hopeful that the effort we have put into advertising the above that at the end of the year our A&E attendances will have fallen.
On-going advertising in the surgery and the website to reinforce the information.

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):

As with this year we were making determined effort to encourage younger patients to join the PPG and this is still on-going both in the surgery and through the PPG members themselves.

To increase access. As we have employed another GP we have found that patients are more satisfied with availability of appointments both in pre-bookable and also emergency appointments.

Last year patients were complaining they had difficulty in getting through on the telephone. We installed another telephone line and this has improved patient satisfaction with this. We are also finding that as more people become aware of online booking that this takes some of the pressure off the telephones.

4. PPG Sign Off

Report signed off by PPG: YES

Date of sign off: 20th 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?

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?

A. We have tried to communicate with the families of the RAF Henlow as we have many of them registered here and many have quite complex social and health issues with the husbands/ wives being away from home for quite long spells.

B. Yes as stated in question 2.

C. Yes.

D. Improved access and easier forms of communication with the surgery resulting in higher patient satisfaction levels.

E. The secretary of our PPG has been extremely active in joining with other groups around the country to try to lobby the government to change the dispensing law as the village had a Chemist open last year and therefore the practice are now unable to dispense to the patients within 1.6km of the chemist. This has caused an extremely angry reaction as many of the patients are elderly and find it very inconvenient.

