

Annex D: Standard Reporting Template

Birmingham and Black Country Area Team 2014/15 Patient Participation Enhanced Service – Reporting Template

Practice Name: **Eve Hill Medical Practice**

Practice Code: **M87006**

Signed on behalf of practice: K Marsk Date: 25.03.15

Signed on behalf of PPG: Hilary A Jones Date: 17/03/15

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 and Email																																					
Number of members of PPG: 55																																					
Detail the gender mix of practice population and PPG: <table border="1" style="width: 100%; border-collapse: collapse; margin-top: 10px;"> <thead> <tr> <th style="width: 20%;">%</th> <th style="width: 40%;">Male</th> <th style="width: 40%;">Female</th> </tr> </thead> <tbody> <tr> <td>Practice</td> <td>49.5%</td> <td>50.5%</td> </tr> <tr> <td>PPG</td> <td>40%</td> <td>60%</td> </tr> </tbody> </table> <p style="text-align: right; font-size: small; margin-top: 5px;">(Correct as of 20 February 2015)</p>	%	Male	Female	Practice	49.5%	50.5%	PPG	40%	60%	Detail of age mix of practice population and PPG: <table border="1" style="width: 100%; border-collapse: collapse; margin-top: 10px;"> <thead> <tr> <th style="width: 10%;">%</th> <th style="width: 10%;"><u><16</u></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>19.5%</td> <td>10.6%</td> <td>12.1%</td> <td>13.2%</td> <td>15.3%</td> <td>11.5%</td> <td>9.2%</td> <td>8.6%</td> </tr> <tr> <td>PPG</td> <td>0.0%</td> <td>9.1%</td> <td>1.8%</td> <td>1.8%</td> <td>14.5%</td> <td>20.0%</td> <td>23.6%</td> <td>29.1%</td> </tr> </tbody> </table> <p style="text-align: right; font-size: small; margin-top: 5px;">(Correct as of 20 February 2015)</p>	%	<u><16</u>	17-24	25-34	35-44	45-54	55-64	65-74	> 75	Practice	19.5%	10.6%	12.1%	13.2%	15.3%	11.5%	9.2%	8.6%	PPG	0.0%	9.1%	1.8%	1.8%	14.5%	20.0%	23.6%	29.1%
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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	4184 82.6%	23 0.5%	0 0%	76 1.5%	77 1.5%	12 0.2%	30 0.6%	16 0.3%
PPG	48 87.3%	0 0%	0 0%	0 0%	0 0%	0 0%	0 0%	0 0%

	Asian/Asian British					Black/African/Caribbean/Black British			Other	
	Indian	Pakistani	Bangladeshi	Chinese	Other Asian	African	Caribbean	Other Black	Arab	Any other
Practice	176 3.5%	109 2.2%	12 0.2%	12 0.2%	17 0.3%	67 1.3%	174 3.4%	28 0.6%	1 0.0%	49 1.0%
PPG	4 7.3%	0 0%	0 0%	1 1.8%	0 0%	0 0%	2 3.6%	0 0%	0 0%	0 0%

(Correct as of 20 February 2015, practice data based on 5063 patients who have ethnic background correctly coded)

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:

Gender - There is more of an interest in the Patient Participation Group (PPG) by female patients. However, this is representative of the patients which are actively seen within the practice in 2014 60% of females had a consultation within the practice and 40% of males. The Patient Participation Group is advertised on the practice website, facebook page and newsletter (available on NHS Choices) in order to ensure that groups which do not regularly attend the practice are aware of it.

Age – The Patient Participation Group is under represented by the under 16's age group and between 25 and 44 years. The group has trying to encourage participation amongst these group by holding 75% of meetings after working hours. A virtual group has also been established so participation can be by email. The practice has a facebook page with 124 likes and 365 visits.

Ethnic Background – the ethnic backgrounds which are above 2.5% of the practice demography are represented within the Patient Participation Group.

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

2. Review of patient feedback

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

Feedback from PPG
Complaints
Internal Survey
Friends and Family Test
National GP Patient Survey

How frequently were these reviewed with the PRG?

Feedback from PPG – Quarterly meetings with PPG
Complaints – Annually (due to volume of complaints being minimal 4 in 12 months)
Internal Survey – Annually
Friends and Family Test – Quarterly – First being January 2015
National GP Patient Survey – Annually

3. Action plan priority areas and implementation

SEE DETAILED ACTION PLAN IN APPENDIX 1.

Priority area 1
<p>Description of priority area:</p> <p>Communication with Patients</p>
<p>What actions were taken to address the priority?</p> <p>Create a practice newsletter</p>
<p>Result of actions and impact on patients and carers (including how publicised):</p> <p>To better communicate key messages with our patients, printed copies are available via the practice website, this is uploaded to the practice website and on NHS Choices.</p> <p>http://www.nhs.uk/Services/gp/Overview/DefaultView.aspx?id=39345#news-title</p> <p>Posters have been printed to advertise the availability of the newsletter in the practice.</p>

Priority area 2

Description of priority area:

Confidentiality in Reception

What actions were taken to address the priority?

- **Sign purchased informing patients of the confidential area.**
- **Promote use of check in screens to ease queues in reception area.**
- **Purchase clipboards to stop patients filling in forms on the reception desk.**

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

- **This has meant that patients are able to discuss confidential matters away from the general reception area.**
- **Increasing the use of the check in screens has resulted in less people around the general reception area.**
- **The purchase of clipboards has meant that there are less patients leaning on the reception desk to complete forms while others are communicating with the receptionist.**

The confidential reception area and the availability of the check in screens has been promoted in the practice newsletter (copy attached). Also, all of the actions have been communicated with patients at the point of contact with the reception area.

Priority area 3

Description of priority area:

Appointments particularly in relation to time waiting from arrival to being seen, online booking and telephone consultations

What actions were taken to address the priority?

- **Introduction of online booking**
- **Promote that availability of telephone consultations**
- **Higher specification check in screen being purchased by CCG – this can show patients how many are in the queue in front of them, promote the use of this.**
- **Promote the need to cancel appointments that are no longer needed and review the MJOG cancelation by text message.**

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

Online booking has been activated for patients registered for online services, this will allow patients to book appointments at a time that suits them. It gives them additional choice by being able to see a range of appointments on booking. It will also ease pressure on the telephone system for those that still want to book by telephone.

Being able to speak to a GP by telephone will again offer patients choice over the method that they communicate with their GP. It will also free up appointments that may have been taken up by someone that did not need an appointment for those that do.

By patients seeing how many patients are in front of them patients will have a greater level of understanding in relation to the wait that they might have, allowing them to make more informed decisions i.e. informing work of how long they are likely to be.

An article in the practice newsletter in relation to patient DNA's and reminding patients to cancel appointments. The use of MJOG cancelation by text message has made it easier for patients to cancel their appointment. Again, by patients cancelling their appointments rather than failing to attend them will increase GP access for those patients that need an appointment.

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):

Action	Progress Made
<p>Following re organisation of the Diabetic Clinic. We will re audit the appointments system again.</p>	<p>In new system for the diabetic clinic, patients are asked to make their appointment rather than have a time booked for them. Due to the rapidly increasing number of patients with diabetes it is not possible for the practice to send out pre arranged appointments due to the high DNA (did not attend) rate and wasted appointment time that was experienced through the previous system.</p> <p>By asking patients to ring to make their own appointment once their blood results are back there are almost no DNA's.</p> <p>The implementation of a database system for managing results and recalls means follow up of all diabetic patients is robust. Both administration and clinical time has been able to be directly given to diabetic patient care and the proof of this is in the nearly 90% score on the diabetic QOF register. This demonstrates the reorganised clinic system has directly benefited patient care in this chronic disease area.</p>
<p>To continue working with the Primary care Foundation, improving access in all areas</p>	<p>Work with Primary Care Foundation now completed. The practice continues to offer an extended hours service, is better using telephone consultation and is now offering online appointments. As demographics, patient demand and technology change patient access will be at the forefront of the practice agenda and forms a part of the practice ongoing continuous improvement plan.</p>
<p>No changes for current requests for blood tests</p>	<p>Current system for requesting diabetic bloods continues to meeting requirements.</p>
<p>Designate a named person for re booking appointments</p>	<p>A named administration person in place, with a robust system which is audited regularly. The named receptionist has also observed the patient journey through the practice from appointment to consultation ensuring her complete involvement and knowledge in the whole process.</p>
<p>Continue to encourage staff to engage with patients attending for chronic disease management appointments and support self care management</p>	<p>Clinical staff are attending diabetic update training sessions, working closely with colleagues in the whole primary health care setting (nurse specialists, podiatrists, etc.) and regularly meeting to discuss patient care plans. Shared responsibilities is monitoring patient disease management plans by telephone are working well.</p>

4. PPG Sign Off

Report signed off by PPG: YES

Date of sign off: 16 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?

The practice does not have any particular seldom heard groups but it has made efforts to engage with underrepresented groups by:

- **Advertising on the practice website**
- **Creating a practice newsletter which is available on NHS Choices, website and in the practice, also posters in the practice.**
- **Creation of a Facebook page**
- **Formation of a virtual PPG for patients who are unable or do not wish to attend meetings**
- **The practice posts documents to group members that do not use the internet and are not able to attend the practice.**
- **The practice holds 75% of meetings in the evening to encourage representation from the working population.**

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

The practice has received feedback from the sources that it has available, including:

- **Feedback from PPG**
- **Complaints**
- **Internal Survey**
- **Friends and Family Test**
- **National GP Patient Survey**

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

The priority areas were discussed at the PPG Meeting on 6 October 2014. The action plan was finalised and agreed at the meeting on the 5 January 2015.

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

The communication between the practice, PPG and patients has greatly improved as a result of the implementation of the practice newsletter. It has provided an essential avenue to give patients the important messages about the practice and wider NHS.

The methods in which patients can access appointments have improved through online booking. Patients are now aware that they can communicate with their GP through a telephone consultations rather than booking an appointment.

There is now a recognised reception area to discuss confidential matters with the reception team and hopefully through the use of clipboards and the check in screen traffic within the reception area will improve.

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

The practice finds the feedback and support of the Practice PPG as invaluable and they are a fundamental part of the management of practice.

EVE HILL MEDICAL PRACTICE
Patient Participation Action Plan 2014-15

Priority for Action	Feedback Sources	Proposed Changes	Who needs to be involved?	What is an achievable time frame?	Progress on Action
Communication with Patients	<p style="text-align: center;">PPG Internal Patient Survey 30% said that would like to receive surgery news by newsletter 45% they would like to use the website</p>	Create a practice newsletter to better communicate key messages with our patients, this will be uploaded to our website and NHS Choices.	KMM, PPG, Practice Staff	February 2015	Completed
Confidentiality in Reception	<p style="text-align: center;">PPG National Patient Survey 17% of patient felt that they were overheard and unhappy with it Internal Patient Survey 64% of patients said that they were unaware of the confidential reception area.</p>	<p>Purchase a sign informing patients of the confidential area</p> <p>Promote use of check in screen to ease queues in reception area.</p> <p>Purchase clipboards to stop patients filling in forms on the reception desk.</p>	KMM, PPG, Practice Staff	<p>February 2015</p> <p>March 2015</p> <p>February 2015</p>	<p>Completed</p> <p>In newsletter, ongoing at point to contact.</p> <p>Completed</p>
Appointments particularly in relation to time waiting from arrival to being seen, online booking and telephone consultations	<p style="text-align: center;">PPG National Patient Survey 38% of patient felt that they had to wait a bit too long Internal Patient Survey 64% of patients said that they would use online booked 14% say that they sometimes remember to cancel their appointment 60% said they would use telephone consultations</p>	<p>Introduction of online booking</p> <p>Promote that availability of telephone consultations</p> <p>Higher specification check in screen being purchased by CCG – this can show patients how many are in the queue in front of them, promote the use of this.</p> <p>Promote the need to cancel appointments that are no longer needed and review the MJOG cancelation by text message.</p>	KMM, PPG, Practice Staff	<p>February 2015</p> <p>January 2015</p> <p>March 2015</p> <p>March 2015</p>	<p>Completed</p> <p>In newsletter, ongoing at point to contact.</p> <p>In newsletter, ongoing at point to contact.</p> <p>Completed</p>