Standard Reporting Template

Devon, Cornwall and Isles of Scilly Area Team 2014/15 Patient Participation Enhanced Service – Reporting Template

Practice Name: Corner Place Surgery

Practice Code: L83103

Signed on behalf of practice: B. van den Berg, Practice Manager Date: 19.03.2015

Signed on behalf of PPG: Signed by Chair. Original available for inspection if required. Date: 19.03.2015

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 and email

Number of members of PPG: 10

Detail the gender mix of practice population and PPG:

%	Male	Female
Practice	49%	51%
PRG	30%	70%

Detail of age mix of practice population and PPG:

%	<16	17-24	25-34	35-44	45-54	55-64	65-74	> 75
Practic	17.21%	8.92%	10.28%	10.83%	14.46%	12.44%	13.43%	12.43%
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PRG	0	0	0	0	20%	10%	70%	0

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Detail the ethnic background of your practice population and PRG:

	White				Mixed/ multiple ethnic groups			
	British	Irish	Gypsy or Irish	Other	White &black	White &black	White	Other
			traveller	white	Caribbean	African	&Asian	mixed
Practice	98.83%	0.17%	0.023	0.07%	0.16%	0.015%		0.015
PRG	100%							

		Asia	Black/African/Caribbean/Black British			Other				
	Indian	Pakistani	Bangladeshi	Chinese	Other	African	Caribbean	Other	Arab	Any
					Asian			Black		other
Practice	0.13%	0.0%	0.024%	0.16%	0.24%	0.10%	0.04%	0.01%	0.0%	0.015 %
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:

Joining forms given to all new patients and available on the website. Representation was discussed at the March meeting of PPG and identified as a priority for the coming year.

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:

- Patient survey forms given to patients attending the surgery in June and in November in order to review progress on telephone access. This was identified as an area for improvement and changes were implemented
- Friends and Family Test feedback. The practice started this in November 2014, ahead of the national initiative. A question relating to satisfaction with telephone access was included for the first 2 months

How frequently were these reviewed with the PRG? Once

3. Action plan priority areas and implementation

Priority area 1

Description of priority area:

To improve patient satisfaction with telephone access. This was our lowest score on the IPQ survey in February 2014 at 63% satisfaction, although better than the national average which was 62%.

What actions were taken to address the priority?

The results of the IPQ survey were circulated to all staff and discussed at a staff meeting. Staff were asked for any ideas for improvement. It was suggested that those admin staff who were in at 8.00 should help with answering phones from 8.00 to 8.30 am, the peak time for phone calls.

A survey was carried out in October/November/December 2014 to see if there was an improvement in levels of satisfaction.

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

Out of 489 respondents, 96% rated their contact with the surgery by phone to be either excellent or very good. This compared well with the previous survey result of 79%.

Admin staff enjoyed doing something different and having contact with patients. Teamwork improved and individuals had a better understanding of each other's roles.

Results of the survey were circulated to members of the virtual patient group by email.						

Priority area 2

Description of priority area:

To engage better with the Patient Participation Group.

To re-form the virtual group as a face to face group.

What actions were taken to address the priority?

Dr Austin and Practice Manager attended a workshop on engaging with patient groups. All members of the virtual group were invited to join the new face to face group. Doctors identified patients they thought would be interested and invitations were sent out. The members of the virtual group were also invited to join, as well as a representative from the Patient Support Group and a member of staff.

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

The first meeting of the group was 17th March 2015.

The group currently consists of 12 patients, a GP, Practice Manager and a member of staff. 9 patients attended the inaugural meeting, with 3 unable to attend. A Chair was elected and there was positive discussion on the way forward. The Group will meet monthly.

Before the next meeting, the Group would like to consider as a priority how to recruit from other age and ethnicity groups. It was

felt that there should be a Committee of those present and a wider group whose	e opinions could be sought on a range of issues.

Priority area 3

Description of priority area:

The Practice has a patient support group which was formed over 20 years ago. It has successfully supported patients with their transport needs, befriending, and social outings. The group would like to attract new members and volunteers and the PPG has been asked to give consideration on how to do this.

What actions were taken to address the priority?

This has been discussed by the PPG and continues to be a priority for the coming year. There is an opportunity to work with the organisation Aging Well and they have met with the PSG and with representatives from the practice. This is an on-going project.

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

Recruitment for volunteers for the Patient Support Group (PSG) continues via the Practice website and new patient pack. The newly-formed PPG will discuss how they can help the PSG in broadening its volunteer base.

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):

Telephone access has been an area requiring continuous improvement. A contributing factor to the problem is the requirement to offer both pre-bookable and on-the-day appointments. A proportion of appointments must be reserved for same-day appointments and this means that many patients phone at the same time, i.e. 8.00 am. Consequently those same-day appointments have often all been taken by 9.00. We are continuing to promote on-line booking of appointments and uptake is slowly increasing. Any on-line appointments not taken by 8.00 am are changed to same-day appointments.
We continue to promote the facility to book ahead.
Last year, waiting room signage was improved and this appears to be helping patients find the correct waiting room for the doctor they're seeing.

4. PPG Sign Off

Report signed off by PPG: YES/NO

Date of sign off:

How has the practice engaged with the PPG:

Until the end of 2014 the PPG was a virtual group with communication carried out electronically with members. This did not prove to be a satisfactory method and it was decided to disband the group and re-from as a face-to-face group.

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

Through our Carer Support Worker and by writing to ethnic groups inviting them to join the PPG.

Initially, the Practice Manager contacted members of ethnic minority groups asking them to participate. No expressions of interest were received. With the new PPG, it is intended to consider how to attract wider representation of the whole practice population.

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

- on-line via the website Friends & Family Test
- face to face with patients and carers
- comments book at front desk
- surveys at front desk

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

Yes, although response from the virtual group decreased over time so a face to face group has been established. The virtual group agreed Priority 1. Priorities 2 and 3 have been agreed by the newly-formed face-to-face group.

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

Changes to staffing levels resulted in improved patient satisfaction with telephone access, as shown by patient satisfaction survey.

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

The Practice continues to strive to improve the quality and efficiency of the service offered to its patients.