

Annex D: Standard Reporting Template

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

Practice Name: St Margaret's Medical Practice

Practice Code: M89005

Signed on behalf of practice: Karen Castle Date: 27th March 2015

Signed on behalf of PPG: Mr Mike Lawrence Date: 30th March 2015

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

Does the Practice have a PPG? YES / NO YES	
Method of engagement with PPG:)	Face to Face, Email, Phone
Number of members of PPG:	11

Detail the gender mix of practice population and PPG:

%	Male	Female
Practice	3481 (49.5%)	3545 (50.5%)
PRG	4 (36.4%)	7 (63.6%)

Detail of age mix of practice population and PPG:

%	<16	17-24	25-34	35-44	45-54	55-64	65-74	> 75
Practice	17.5%	7.6%	10.3%	12.4%	15.3%	11.3%	11.6%	14%
PRG	0	0	0	18.2%	36.4%	0	36.4%	9%

Detail the ethnic background of your practice population and PRG:

	British Irish	Gypsy or Irish traveller	Other white	White Mixed/ multiple ethnic groups	White &black Caribbean	White &black African	White &Asian	Other mixed
Practice	4481	70	1	?	23	?	?	?
PRG								

	Indian Pakistani	Bangladeshi	Asian/Asian British	Chinese	Other	Black/African/Caribbean/Black British	Other
Practice	302	172	20	?	74	?	?
PRG						5	?

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:

The figures for Ethnicity are very sketchy as it depends on who records the data and what read codes are used. It is difficult for us to give accurate figures as the info is not recorded on all of the medical records. All new patients who register have a record of Ethnicity as part of the new patient check. Out of our 7026 registered patients we have a ethnicity recorded for 5357 (76.2%) Out of which 83% are recorded as white British and 17% are from other ethnic groups.

Our PPG is open to all patients regardless of gender, age or race. All patients have the same opportunity to join and have an input and this is advertised on our website, quarterly newsletters, notice boards in the surgery and face to face contact with reception staff

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:

We have a very high elderly population and a large proportion of these patients live in Nursing/Residential homes. The practice look after 7 homes. We have found it difficult to recruit patients from this group as most of them are housebound or have a diagnosis of Dementia

2.Review of patient feedback

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

Our practice/PRG discussions always mention our car park issues, this is also complained about on a regular basis. Unfortunately due to the constraints of our premises and land there is no real room for improvement. We have tried to address the issues and are aware of the ongoing problems.

The outcome of our previous years survey (Blood tests and appointments) have been addressed, we now offer blood tests in house and we altered our ratio of pre bookable and same day appointments.

The trees to the boundry of the property have been discussed

Urgent care update and Ward 10 (dementia) closure have been discussed. Mr Mike Lawrence has had involvement with the Ward 10 issues

Following our last meeting we have decided to re audit our appointment system as we feel there is still potential to improve.

We also felt that feedback on the cleanliness of the premises should be addressed as this would help us become infection control compliant.

There was also discussion around our DNA figures. The practice chose DNA's as part of the Practice Development Plan for 14/15 and an initial search was carried out for the first quarter (April – June 2014) which showed that there were 201 DNA's across the Doctors and Nurses. This is obviously and ongoing issue as it has an impact on the appointment system and availability of appointments .

A survey has been conducted to obtain feedback on the appointments, cleanliness of premises and also reception team and how they were perceived by patients.

An inhouse audit of our DNA figures has been carried out and the final quarter (Jan – March 15) has been compared with the first quarter following measures that have been put in place over the year to try and improve the level of DNA's

How frequently were these reviewed with the PRG? Quarterly

Action plan priority areas and implementation

Priority area 1

Description of priority area: **Appointment Availability** This seems to be an ongoing challenge and we decided to address the same questions in this survey and directly compare with the survey of 2013/14 to see whether there was any improvement.

76% felt they were able to book in advance compared to 70% last year
60% were able to get an appointment time that suited them compared to 75% last year
76% said they were able to see their own Doctor compared to 75% last year
68% felt that the surgery opening hours met their needs compared to 77% last year
68% were able to get through on the telephone compared to 61% last year
84% felt that waiting times were acceptable compared to 70% last year

What actions were taken to address the priority?

Going forward we still need to monitor the appointment system particularly around holiday and BH periods.
% of pre bookable: same day will be adjusted according to holidays
Monday appointments are kept as same day bookable this allows us to offer more first thing Monday
We are aware that some Doctors have less appointments available and we will address this
We have set up designated Nurse led clinics for COPD, Asthma and propose to role this out to Hypertension and Diabetes ,
hopefully this will have an impact on the appointments available for the Doctors who would normally carry out the review

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

We have more appointments available across the week
There is now the availability to book appointments on line

Results of survey published on website, and in newsletter

Priority area 2

Description of priority area: Cleanliness of Surgery

We were not entirely satisfied with the current level of cleaning and wanted to engage patients and obtain feedback. There were some areas of the premises that we felt were not up to standard

What actions were taken to address the priority?

Infection Control Audit was carried out

The nurses felt unhappy with the level of cleaning was not satisfactory

76% of patients felt that the consulting rooms were very clean

68% of patients felt that the waiting room area was clean

Liaise with Jill Harries, IC Lead at CCG

From an infection control point of view this percentage was not good enough

Open lines of communication with the Cleaning company and they were given a timescale to improve

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

Infection control compliant

A safer more pleasant environment for patients to be treated

Increased confidence

Results of the Infection Control Audit showed 97% this will be published on our website and in our next newsletter

Priority area 3

Description of priority area: DNA Appointments

We have a large number of DNA's across the Doctors and Nurses

What actions were taken to address the priority?

A baseline audit was run April – June 2014 and identified 201 DNA's

DNA Figures are publicised in the waiting room and in the newsletters.

Measures were put in place to try and improve by means of

- Reviewing and updating the DNA Policy
- Writing to all patients who DNA
- Setting up and sending confirmation of appointment booking via SMS text message
- Setting up reminder of appointment (1 day prior) via SMS text message
- Our Diabetes and COPD co-ordinators telephone the patient a couple of days prior to their appointment to remind them
- Educating patients not to be a DNA

A further Audit was run for the last quarter (January-March 2015) which has identified 184 DNA's

Although there is a decrease in the number of DNA's there is still considerable room for improvement and this will continue to be an ongoing exercise

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

Educating patients to cancel unnecessary/unwanted appointments will in the long term make more appointments available. This ties in with our appointment action plan and hopefully by reducing our DNA figures our appointment figures will improve.

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):

Our Action Plan last year highlighted the problems with blood tests. We now offer these in the surgery with our Healthcare Assistant. This has had a big impact on the number of complaints regarding waiting times and access to hospital.

Home visits to the elderly and housebound are also offered routinely

The car parking was highlighted last year and unfortunately is an ongoing problem, we regularly receive complaints about the car parking facilities.

We are aware that it is not ideal and regularly discuss ways to improve the situation but it will continue to be an ongoing issue to the constraints of the building and the land. We feel our only way to improve this issue is to move premises.

3.PPG Sign Off

Report signed off by PPG: YES/

Date of sign off: 30th March 2015

How has the practice engaged with the PPG: Regular meeting

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

Advertised on the website, in newsletters, sms text messages, designated PPG notice board at entrance to surgery

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

We have emails sent into practice and face to face contact

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?

Improved access

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

It is continuous .

We would also like to recruit more members

Link to the practice Website is www.stmargarets.gpsurgery.net on the home page click on patient group tab then patient survey and results.