Annex D: Standard Reporting Template

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

Practice Name: DOVE VALLEY PRACTICE

Practice Code: C85007

Signed on behalf of practice: 25.3.2015

Signed on behalf of PPG: The group is virtual, however they have all been sent a copy of the final report and the replies received were all

Date: 25.3.2015

positive and they agreed to the content of the report and that it could be signed off

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) **EMAIL/POST. Developing our patient participation group is an ongoing** process, work started in March 2011 in order to recruit patients to the patient participation group, but due to lack of interest we decided that a 'virtual' group may be a more attractive option whereby the practice and patients communicate via email or by post

Number of members of PPG: 104

Detail the gender mix of practice population and PPG:

%	Male	Female
Practice	49%	51%
PRG	37.5%	62.5%

Detail of age mix of practice population and PPG:

%	<16	17-24	25-34	35-44	45-54	55-64	65-74	> 75
Practice	18%	10%	13%	12%	15%	12%	10%	10%
PRG	5%	19%	19%	14.5%	14.5%	12.5%	15.5%	0%

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	82.06%	0.22%			0.04%	0.29%	0.17%	
PRG	84%	4%		5%		1%		

	Asian/Asian British					Black/African/Caribbean/Black British			Other	
	Indian	Pakistani	Bangladeshi	Chinese	Other Asian	African	Caribbean	Other Black	Arab	Any other
Practice	0.06%	0.08%		0.07%		0.22%				
PRG				2%		1%			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:

The practice has forwarded information/registration forms to local LINK workers and the Equality & Diversity Managers as well as local chemists in a bid to recruit patients from minority groups. Posters have been displayed in both surgeries and details of the PPG are included on the practice's website to try and engage patients of all ages and backgrounds.

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/NO

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

NO

2. Review of patient feedback

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

PATIENT SURVEY RESULTS 2013
FAMILY & FRIENDS TEST
COMPLAINTS/COMMENTS/SUGGESTIONS RECEIVED FROM PATIENTS/MEMBERS OF THE PUBLIC/STAFF

How frequently were these reviewed with the PRG?

We have consulted the PPG on various subjects and involve them in decisions about proposed changes to working practice as and when required (the group were consulted regarding 5 issues throughout 2014).

3. Action plan priority areas and implementation

Priority area 1
Description of priority area:
Difficulties with telephone access.
What actions were taken to address the priority?
Patient Partner system to be installed at both sites We promote to patients that we have 2 sites and that they can ring either number We have added a message to Gold Street Surgery lines advising patients that the 'phone will be answered shortly and that their call is important We have a dedicated unplanned admissions telephone line
Result of actions and impact on patients and carers (including how publicised):
Patients have the option to contact either surgery – both telephone numbers are given on the website and bi-monthly newsletter as well as the practice leaflet
Once installed Patient Partner (voice connects) will speed up telephone access and allow more patients telephone access, when this project has been completed, we will advise patients via the practice website and bi-monthly newsletter.

Priority area 2
Description of priority area:
The number of prescriptions misplaced or not ready when the patient comes to surgery to collect
What actions were taken to address the priority?
Prescribing Clerk roles have been implemented, this means that we have named members of staff who are responsible for any prescription queries. EPS has been advertised and promoted to patients
Result of actions and impact on patients and carers (including how publicised):
Having named Prescribing Clerks provides continuity and a named person for patients/chemists to contact with any questions they may have. EPS provides a quicker, more efficient service for patients and frees up some staff time EPS makes it easier to track prescriptions and therefore the patients/chemists can be advised about where the prescription is in the process. The patients do not have to visit the surgery to collect the printed prescription

Priority area 3
Description of priority area:
Lack of GP appointments
What actions were taken to address the priority?
Additional GP hours have been implemented
Additional appointments are added as necessary The GP rota is reviewed regularly and revised where necessary, taking into account patient demand, GP absence etc
Patients can register to book appointments online
Result of actions and impact on patients and carers (including how publicised):
Patients should be able to be seen quicker, children and emergency cases are seen on the same day or telephone advice can be given. Online access gives the freedom to book appointments out of working hours and provides patient choice, this has been widely publicised on the practice, website, information notices and the practice newsletter.

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):

We carried out patient surveys in 2012 and 2013 and booking appointments and telephone access were identified as issues that needed action. Our last patient survey was carried out in September 2013 and an action plan was put in place at that time to try and address those issues.

The Care Quality Commission inspected Dove Valley Practice in December 2014 and part of this process was to contact patients prior to the visit and speak to patients on the day of the visit. The result of this consultation process was that;

- Patients were complimentary about the appointments system and ease of access and of the flexibility provided
- A higher than national average percentage of patients stated that they were very or fairly satisfied with the opening hours
- A higher than national average of patients would recommend the practice to others, were satisfied with the telephone access and reported a good overall experience of making an appointment
- Patients who were asked on the day of the CQC visit stated that they could book to see the same GP and some have seen the same GP for many years, the patients also spoke positively about the Nurses.

We feel that these comments suggest that the actions taken have made a positive impact and that progress has been made.

4. PPG Sign Off

Report signed off by PPG: YES

Date of sign off: 25 MARCH 2015

How has the practice engaged with the PPG:

We have consulted the PPG on various subjects and involve them in decisions about proposed changes to working practice as and when required by email and post

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

The practice has forwarded information/registration forms to local LINK workers and the Equality & Diversity Manager in a bid to recruit patients from minority groups. Posters have been displayed in both surgeries and details of the PPG are included on the practice's website

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? Yes

How has the service offered to patients and carers improved as a result of the implementation of the action plan? The comments provided within the CQC inspection indicate that the actions taken have made an improvement to the service provided, the appointment system has been improved and is reviewed regularly, patients have more options when booking appointments and requesting prescriptions.

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