

West Yorkshire Area Team
2014/15 Patient Participation Enhanced Service – Reporting Template

Practice Name: Bellbrooke Surgery

Practice Code: B86081

Signed on behalf of practice: Tom Roche, Business Manager

Date: 30 March 2015

Signed on behalf of PPG: Virtual PPG

Date: 30 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: Newsletter/Reports via royal mail																																					
Number of members of PPG: 13																																					
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: 30%;">Male</th> <th style="width: 30%;">Female</th> </tr> </thead> <tbody> <tr> <td>Practice</td> <td style="text-align: center;">51.4</td> <td style="text-align: center;">48.6</td> </tr> <tr> <td>PRG</td> <td style="text-align: center;">46.2</td> <td style="text-align: center;">53.8</td> </tr> </tbody> </table>	%	Male	Female	Practice	51.4	48.6	PRG	46.2	53.8	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%;"><16</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 style="text-align: center;">28.0</td> <td style="text-align: center;">11.2</td> <td style="text-align: center;">16.7</td> <td style="text-align: center;">15.00</td> <td style="text-align: center;">12.2</td> <td style="text-align: center;">7.9</td> <td style="text-align: center;">4.8</td> <td style="text-align: center;">4.2</td> </tr> <tr> <td>PRG</td> <td style="text-align: center;">0.00</td> <td style="text-align: center;">0.00</td> <td style="text-align: center;">15.4</td> <td style="text-align: center;">23.1</td> <td style="text-align: center;">15.4</td> <td style="text-align: center;">30.8</td> <td style="text-align: center;">15.4</td> <td style="text-align: center;">0.0</td> </tr> </tbody> </table>	%	<16	17-24	25-34	35-44	45-54	55-64	65-74	> 75	Practice	28.0	11.2	16.7	15.00	12.2	7.9	4.8	4.2	PRG	0.00	0.00	15.4	23.1	15.4	30.8	15.4	0.0
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Detail the ethnic background of your practice population and PRG:

	White				Mixed/ multiple ethnic groups			
	British	Irish	Gypsy or Irish traveller	Other white	White &black Caribbean	White &black African	White &Asian	Other mixed
Practice	48.14	1.29	0.05	12.52	1.40	3.87	0.62	1.21
PRG	69.23							

	Asian/Asian British					Black/African/Caribbean/Black British			Other		
	Indian	Pakistani	Bangladeshi	Chinese	Other Asian	African	Caribbean	Other Black	Arab	Any other	Unknown
Practice	0.74	3.24	0.14	0.64	2.07	9.03	0.30	1.85	0.23	8.43	4.24
PRG					7.69			23.08			

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 are aware that the Practice is located in a culturally diverse area of Leeds and so made positive attempts to ensure the PRG where possible reflected diversity. Since its initial formation in 2011 we have continued to advertise the existence of our PRG have continued to encourage patients to join the group. Application forms continue to be available in the surgery or via the website. Attempts have been made to recruit Patients from underrepresented groups by clinicians making an approach at the end of their consultation or by staff approaching patients directly in the waiting areas. Language Line was available if required. The PRG continues without representation from the under 25 age band last year despite our continued efforts to identify representatives for the PRG by advertising and approaching to patients in this age band. Despite this gap, the analysis of our PRG membership continues to show that our PRG continues to be a representative group in terms of gender, age, sex and nationality. Of the patients' who continue to volunteer their involvement, some suffer with a disability or long term condition, while others are carers, some are frequent callers to the surgery and others come rarely. We also have a range of full time employed patients to patients who are now retired from work. As in previous years, we continue to leave the PRG membership open via the website and directly through the Practice

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:

In previous years this was a mandatory requirement of the Patient and Participation Enhanced Service but this was dropped this year and instead gave practices the option of using nationally available survey results, the new Friends and Family Test, and themes of comments and complaints made by patients. We have therefore decided to use the results of the national patient survey this year as a basis for gauging the opinion of our patients along with the first few months Friends and Family test results. The development of a bespoke questionnaire usually produces questions that are similar to the national patient survey but the bespoke questions do not produce comparative results; this information can be very valuable in terms of helping us in terms of making improvements.

We have therefore produced an extract of the most recent quarter's results and shared this with you as a member of our PRG and produced a short report to highlight some of the key areas. We would like you to consider these results and the information in this report to help us identify what actions you think we need take.

The GP Patient Survey is an independent survey run by Ipsos MORI on behalf of NHS England. The survey is sent out to over a million people across the UK each year. Questionnaires are distributed at random to patients who have been registered with a GP practice during the last six months. Patients can either complete the paper survey they receive or respond via an electronic version of the questionnaire using the unique code they are provided with. Patients who speak other languages or use British Sign Language can also complete the questionnaire by special arrangement.

As in previous years, this work is being supported by Primary Care First; a Primary Care Consultancy firm with significant experience and expertise in this field. This continues to ensure that the analysis of the survey results remain independent and credible. They have extracted the results of the National Patient Survey for the last quarter from www.gp-patient.co.uk and have compared our results against those of all of the other practices in South and East Leeds Clinical Commissioning Group (CCG). The website gp-patient.co.uk contains results for all practice survey results for GP surgeries in England.

How frequently were these reviewed with the PRG?

Annually

3. Action plan priority areas and implementation

Priority area 1
<p>Description of priority area:</p> <p>Improving waiting times in the queue when telephoning the surgery</p>
<p>What actions were taken to address the priority?</p> <p>The PPG have flagged this as an issue for us to review and address during 2015/16. Despite reconfiguration of our reception area during 2014/15 and additional lines being installed on the telephone system, waiting times are still being flagged as an issue by PPG members and feedback from patients in the Friends and Family test. Some complaints we receive also relate to waiting times in the telephone queue.</p>
<p>Result of actions and impact on patients and carers (including how publicised):</p> <p>We will start a review and feedback initial findings to our PPG members during the first quarter of 2015/16.</p>

Priority area 2

Description of priority area:

Addressing issues with continued high 'Failure to keep appointment rates'

What actions were taken to address the priority?

Last year we reviewed 'Failure to keep appointment rates' aka Did not attend rates and found these to be significantly higher than those in other practices.

We started to send appointment confirmations/reminders to patients booking appointments but acknowledge that around half of patients don't have a mobile telephone number on their record. On those that we do have, a proportion of them are not up to date. The appointment reminder system cannot send reminders later than 2 days – a majority of our appointments are booked less than a day before the appointment takes place.

We intend to put in place mechanisms to regularly check the mobile number and a wider programme to ensure we have a better proportion of patients' mobile numbers.

We are also intending to review our current 'Failure to keep appointment' policy.

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

We will discuss initial work with the PPG during the first quarter of 2015/16

Priority area 3

Description of priority area:

Improve 'Consulting time' for practice nurses

What actions were taken to address the priority?

The PPG have asked us to consider how we might improve the consulting time made available for patients seeing our nursing staff.

We have started to re-design our COPD management service so that the nurses can provide more time with patients in line with the Year of Care/House of Care approach.

We have also started a redesign of our recall system which will ensure patients are allocated more appropriate times for consultations.

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

We will provide the PPG with initial feedback during the first quarter of 2015/16.

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):

LAST YEARS FEEDBACK AND ACTIONS TAKEN

As you will know the results of our last questionnaire highlighted a number of concerns which are listed below together with actions we have taken since last June:

Issue – Our Receptionists:

- a) 12.4% of patients indicated that the receptionist who dealt with them on the telephone hadn't given their name
- b) 51.5% of receptionists needed some form of support from their colleagues
- c) Some patients expressed being unhappy with their operator call charges when using their mobile telephone to book an appointment via our 0844 number

We did:-

- We reviewed our policy in conjunction with our reception team in terms of call handling to ensure that the whole team fully understood what was expected of them.
- During appraisals the training needs for all reception staff were identified and training was provided to those team members who flagged up any issues.
- We re-issued advertising of the change of telephone number that occurred last year and extended this to include messages on repeat prescription counterfoils, a message on the 'call in' system and a recorded message on the current 0844 telephone line advising a local telephone number was available.

Issue – Friends and Family test pilot:

The pilot run of the friends and family test identified the following themes:

- a) The practice wasn't worker friendly
- b) Telephone calls to the surgery were expensive
- c) Telephone lines were often engaged at key times when patients need to book appointments

We did:-

- We reviewed how we publicised our extended opening times and felt that the notices we had in place were prominently displayed. Reception staff were also encouraged to mention the extended hours opening to those patients who indicated they found it difficult to attend due to work commitments.
- We reviewed our current service model and felt that it would be difficult to extend the opening times we offered without compromising other aspects of the current opening hours.
- When we upgraded the telephone system in 2014 we re-issued advertising of the change of telephone number and extended this to include messages on repeat prescription counterfoils and a message on the 'call in' system and a recorded message on the current 0844 telephone line advising a local telephone number was available
- We have started the process for enabling online appointment booking facilities for patients and this will be live during the next few weeks. This means that patients with computers and smart phones will have an alternative to telephoning or calling in at the practice to book appointments.
- We added additional capacity to our telephone system with an additional telephone line and extra staff cover during peak times in the morning.

Issue – Missed Appointments:

The patients who declared that they had missed an appointment made a number of suggestions on how the practice could help to ensure they keep their appointments in future. The most popular suggestion made in response to this question was for the practice to send a text message reminder.

We did:-

- We switched on appointment reminder facilities during September 2014; this meant patients who had provided us with a mobile telephone number would receive an initial text message confirming the booking and then a further reminder 2 days before the appointment.
- We have reviewed DNA rates and these have improved very slightly.
- We are in the process of setting up a 'text in' service for patients to cancel their appointment via text message and expect to have this in place by the end of this month.

4. PPG Sign Off

Report signed off by PPG: YES

Date of sign off: 30 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?

The PPG have been consulted on in setting the priority areas and will be encouraged to emerge as an 'actual' patient reference group during 2015/16. In previous years, the PPG have been engaged with the practice as a 'Virtual' group through written and telephone based communication.

The practice continues to engage with a wide range of patients through reviewing the results of the national patient survey, assessing themes being flagged up by the Friends and Family test and identifying the 'issues' being raised in both written and verbal complaints from patients.

The practice continues to take the feedback we receive in to account and responds to address issues where changes are necessary