

Annex C

**Arden, Herefordshire and Worcestershire Area Team
Patient Participation Enhanced Service 2014/15 – Reporting Template**

Practice Name: Hollywood Medical Practice

Practice Code: M81064

Signed on behalf of practice: Melanie Potter

Date: 23rd February 2015

Signed on behalf of PPG: L Oakley, C Rolinson and S Wilson

Date: 23rd February 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) Email as it is a Virtual Group																																					
Number of members of PPG: 22																																					
Detail the gender mix of practice population and PPG: Practice List Size 6513 <table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th style="width:20%;">%</th> <th style="width:20%;">Male</th> <th style="width:20%;">Female</th> </tr> </thead> <tbody> <tr> <td>Practice</td> <td>49%</td> <td>51%</td> </tr> <tr> <td>PPG</td> <td>0.65%</td> <td>0.63%</td> </tr> </tbody> </table>	%	Male	Female	Practice	49%	51%	PPG	0.65%	0.63%	Detail of age mix of practice population and PPG: <table border="1" style="width:100%; border-collapse: collapse;"> <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>17.5</td> <td>8.46</td> <td>10.57</td> <td>11.1</td> <td>14.58</td> <td>13.2</td> <td>13.4</td> <td>10.6</td> </tr> <tr> <td>PPG</td> <td>0</td> <td>0.3</td> <td>0.1</td> <td>0.5</td> <td>0.2</td> <td>0.4</td> <td>0.4</td> <td>0.7</td> </tr> </tbody> </table>	%	<16	17-24	25-34	35-44	45-54	55-64	65-74	> 75	Practice	17.5	8.46	10.57	11.1	14.58	13.2	13.4	10.6	PPG	0	0.3	0.1	0.5	0.2	0.4	0.4	0.7
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Detail the ethnic background of your practice population and PPG: **Practice List Size 6513 – we do not have ethnicity recorded for all our patients therefore this data is not a true or accurate reflection of the ethnicity of all our patients. However we are predominantly white British. Where data can be extracted this has been done.**

	White = Recorded 1158				Mixed/ multiple ethnic groups = Recorded 0			
	British	Irish	Gypsy or Irish traveller	Other white	White &black Caribbean	White &black African	White &Asian	Other mixed
Practice	1145	10	0	3				
PPG	22	0	0	0				

	Asian/Asian British = Recorded 2					Black/African/Caribbean/Black British			Other	
	Indian	Pakistani	Bangladeshi	Chinese	Other Asian	African	Caribbean	Other Black	Arab	Any other
Practice										
PPG										

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 actively promotes the PPG on the Website, via Poster Campaigns and Newsletters. All patients are welcome to join, application forms are freely available to download or can be obtained from visiting Reception as they are displayed in the waiting room.

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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

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:

We undertake an annual survey with an update midterm. The PPG is involved in the creation of the survey, they are asked for their input and suggestions regarding areas of particular concern or interest. They are consulted with regards the format of the survey and are privy to the responses and comments raised following the survey. Following on from review they are involved in the actions and invited to make suggestions or come up with ideas on how to implement change following issues raised from auditing the survey.

Once action plans are drawn they are invited to comment and/or approve the plans and then we publish the results and implement them within an agreed timeframe.

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How frequently were these reviewed with the PRG?

The PPG has been given the option to contact the surgery with any concerns, ideas or suggestions which can help the Practice improve the service it provides. There is an 'open door' policy and we are happy to communicate throughout the year. At present because the PPG is still in its infancy, we try to provide updates and an insight into various areas of the Practice as and when the need arises. PPG members who wish to be more proactive have been given the option of developing a self-running group and the Practice is happy to hear from them.

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3. Action plan priority areas and implementation

Priority areas 1 and 2
<p>Description of priority areas:</p> <ol style="list-style-type: none"> 1. Satisfaction with contacting the surgery 2. Overall Opinion on entering the premises
<p>What actions were taken to address the priority?</p> <p>Promote online booking through poster campaigns, Jayex Board and Newsletters. Offer more on the day appointments; provide the staff with call handling training which may speed things up.</p> <p>Plans underway to decorate and rearrange some areas of the reception area.</p> <p>.</p>
<p>Result of actions and impact on patients and carers (including how publicised):</p> <p>Easier access, improve the efficiency of patient contact. Promoting online booking as detailed above will help reduce reception workload.</p> <p>Enhance the reception area and make it more user friendly.</p>

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Priority areas 3 and 4
<p>Description of priority area:</p> <ol style="list-style-type: none">3. Service Provided by Reception4. Provision of Practice Information and Healthcare Literature
<p>What actions were taken to address the priority?</p> <p>Agreed to look into soundproofing options in the Reception area. Promote the use of the interview room for discreet and confidential conversations and to make adjustments to the reception desk. This in conjunction with staff training should help improve privacy issues.</p> <p>Relocate the leaflet stand to a more discreet area of the waiting room.</p>
<p>Result of actions and impact on patients and carers (including how publicised):</p> <p>Promoting the use of the interview room at reception and by utilising posters will give the patient the option of discussing concerns or queries in a more confidential manner. This should improve privacy issues.</p> <p>Patient information leaflets are now placed in an area which is not totally in view of all, it allows patients to choose literature discreetly without feeling embarrassed or aware they are being watched.</p>

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Priority area 5
<p>Description of priority area:</p> <p>5. Satisfaction with your Consultation</p>
<p>What actions were taken to address the priority?</p> <p>Agreed to provide more information to patients regarding prescribing guidelines so that they have a better understanding of decisions made.</p> <p>Make patients aware of any delays, by providing information if clinicians are running behind.</p>
<p>Result of actions and impact on patients and carers (including how publicised):</p> <p>Hopefully patient education as to prescribing decisions, especially antibiotics, will help alleviate any confrontation with the Doctors and also help discourage patients from booking unnecessary second appointments in order to be given a prescription by another clinician. Literature together with discussion can help alleviate difficulties encountered when prescribing.</p> <p>Giving patients information and communicating when we are running behind will help alleviate frustration and give them the option of re-booking if there is a considerable delay. Hopefully improve patient relations.</p>

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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):

In line with previous action plans, we have abolished the 3 pm 'opening up' of afternoon appointments – this took a short time to implement but has hopefully made a difference with patients not having to call the surgery more than once for an 'on the day' appointment. The Reception staff have noticed that the queue of people turning up in reception and requests for appointments in the afternoons has slowly dwindled.

Telephone consultations, we have continued to promote this service, we have detailed in previous newsletters the types of concerns/queries that can be dealt with over the telephone. We have also updated the Jayex Board in the reception area to provide more information about this service. We still need to further promote this in house; but ultimately it is patient's choice.

The introduction of EPS (Electronic Prescription Service) proved eventful! As a practice we agreed that we would not sign up patients for this service we would leave this to the pharmacies to promote. Once we went live there were a considerable number of patients who had signed up for this service with local pharmacies, however some of these patients did not fully understand the implications of signing up – as such there were a few problems. We still offer various ways in which patients can request repeat medication, the EPS option is not for everyone but once past the teething stage, this has made a difference.

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4. PPG Sign Off

Report signed off by PPG: **YES**

Date of sign off: **23rd February 2015**

Has the report been published on the practice website? **YES**

How has the practice engaged with the PPG:

Virtual Group through email

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

Through poster campaigns, website and newsletters.

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

Hopefully yes, the survey was open to all patients and carers who attended during a two week period in February; survey forms were readily available in the Waiting Room and could be filled in and posted anonymously.

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

Yes, full consultation with the PPG was implemented throughout the process.

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

With regards last year's actions, there has been improvement in the appointments system, however we are just in the process of implementing this year's actions and these will be reviewed in greater detail midterm.

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

No

Please return this completed report template to the generic email box – england.ahwat-pc@nhs.net no later than 31st March 2015.