Standard Reporting Template

NHS England (Wessex)

2014/15 Patient Participation Enhanced Service – Reporting Template

Practice Name: The Panton Practice

Practice Code: J 81072

Signed on behalf of practice: Jo Legrave (Practice Manager) Date: March 2015

Signed on behalf of PPG: Jenny Furber Date: March 2015

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

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| Does the Practice have a PPG? YES / NO **YES** |
| Method of engagement with PPG: Face to face, Email, Other (please specify) **Face to face and email** |
| Number of members of PPG: **53** |
| Detail the gender mix of practice population and PPG:

|  |  |  |
| --- | --- | --- |
| % | Male  | Female  |
| Practice | 6435 | 6023 |
| PRG | 28 | 25 |

 | Detail of age mix of practice population and PPG:

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| % | <16 | 17-24 | 25-34 | 35-44 | 45-54 | 55-64 | 65-74 | > 75 |
| Practice | 1690 | 1220 | 3253 | 2064 | 1343 | 987 | 848 | 1053 |
| PRG | 0 | 0 | 2 | 1 | 4 | 10 | 21 | 15 |

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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  | 820 | 6 | 0 | 615 | 11 | 27 | 22 | 54 |
| PRG | 8 | 0 | 0 | 0 | 0 | 0 | 0 | 1 |

|  |  |  |  |
| --- | --- | --- | --- |
|  | Asian/Asian British | Black/African/Caribbean/Black British | Other |
|  | Indian | Pakistani | Bangladeshi | Chinese | Other Asian | African | Caribbean | Other Black | Arab | Any other |
| Practice | 440 | 39 | 18 | 111 | 72 | 25 | 5 | 15 | 11 | 364 |
| PRG | 0 | 0 | 0 | 1 | 0 | 0 | 0 | 0 | 0 | 0 |

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| 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 endeavoured to recruit patients’ representative of all areas of the practice population: all ethnic groups, all age groups and the fit and healthy as well as the unwell. We do this through information in the surgery with sign up forms available. We do recognise that we have a low uptake of younger patients wishing to join to PPG this may be due to work and family commitments. This group is often represented through the older age group as thoughts are brought to the meetings from discussions held with younger family members.  |
| 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/NOIf you have answered yes, please outline measures taken to include those specific groups and whether those measures were successful:There are currently 53 members on the PPG with the majority of them being in the older population of the practice. We have had minimal new members join us this year even though our more founder members of the PPG came into both surgeries on occasions and generally spoke with patients to give them informative information about the PPG and asked if patients would like to become members. Some patients filled in the sign up form but then do not participate in any further meetings. We do also actively invite the patient group members to our meetings but often find a low attendance. There is a high student population within our practice area and although to date we have not actively recruited any patients within this age group it has been agreed that this is one of the target plans we will move forward with.  |

1. Review of patient feedback

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| Outline the sources of feedback that were reviewed during the year:Friends and Family test commentsDirect comments from patients at the practiceNHS ChoicesComplaints |
| How frequently were these reviewed with the PRG?These have not been reviewed with the PRG. This will be something we plan to include in our meetings next year. |

Action plan priority areas and implementation

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| Priority area 1 |
| Description of priority area:Appointment availability |
| What actions were taken to address the priority?* Reduce the sit and wait urgent clinic from two to one session per day
* Increase the capacity for routine bookable appointments
* Allow forward booking to 5 weeks in advance
* Promote online appointment booking
 |
| Result of actions and impact on patients and carers (including how publicised):* We put up posters in the practice and a notice on our website to inform patients that we would be stopping the sit and wait clinic in the afternoon.
* By stopping the afternoon sit and wait clinic each doctor now has 14 routine bookable appointments to offer in advance. One doctor remains the duty doctor in the afternoon to triage any urgent telephone calls. This has reduced the waiting time to see any doctor from four weeks to two weeks.
* Allowing future booking of appointments up to 5 weeks. This increase in capacity has allowed patients to book an appointment that is more suitable to them.
* Redesigned the advertising posters for the online booking and made them bolder. Offered the online service opportunistically when speaking with patients about appointments. This work has increased our uptake of online users.
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| Priority area 2 |
| Description of priority area:Telephone access to a GP |
| What actions were taken to address the priority?* Increase in the number of routine telephone appointments available
* When patients telephoned for an appointment they were offered the choice of a routine telephone call or a face to face appointment.
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| Result of actions and impact on patients and carers (including how publicised):* The result of these actions were twofold as patients welcomed the availability of a telephone consultation rather than coming into the practice and this also reduced the waiting time for a routine face to face appointment.
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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):

Carers support was raised as one of the issues last year, where patients did not feel supported enough. We now have a receptionist who is our carers lead within the practice and she keeps up to date with information and services. The practice has used the foyer to promote carers information and support and also gives the name of our carers lead as a point of contact for patients.

We continue to promote our online access, patients who have signed up to this service has increased and we will continue to work on this following the new guidelines on patients being able to access health records.

Last year the electronic prescription service was in its early stages and patients were keen to sign up to this once the service was live. The practice activated this service in February 2015 and we have seen a positive response for which we will continue to promote.

1. PPG Sign Off

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| Report signed off by PPG: NODate of sign off:  |
| 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? |