Patient Participation Group Reporting Template



Area Team

2014/15 Patient Participation Enhanced Service

Practice Name: Siam Surgery

Practice Code: D83075

Signed on behalf of practice: Dr Adrian Kemp Date: 18th 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: Meetings, email.

Number of members of PPG:14

Detail the gender mix of practice population and PPG:

%	Male	Female
Practice	49%	51%
PRG	22%	78%

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	14	11	15	12	11	9
PRG	0	0	0	7	7	14	57	14

Detail the ethnic background of your practice population and PRG:

	White			Mixed/ multiple ethnic groups				
	British Irish Gypsy or Irish		Gypsy or Irish	Other	White &black	White &black	White	Other
			traveller	white	Caribbean	African	&Asian	mixed
Practice	80%	0.5%	0%	5%	0.02%	0.2%	0.01%	0.2%
PRG	100%	0%	0%	0%	0%	0%	0%	0%

	Asian/Asian British				Black/African/Caribbean/Black British			Other		
	Indian	Pakistani	Bangladeshi	Chinese	Other Asian	African	Caribbean	Other Black	Arab	Any other
Practice	0.3%	0.06%	0.2%	0.01%		0.1%	0.2%	0%	0%	0%
PRG	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%

We have had a Patient Participation Group for 5 years; weencourage members of all ages and ethnic backgrounds. Our group is open to all registered patients; we advertise our group on the practice website, on NHS Choices, on a notice board in the waiting area, in the surgery newsletter and our new patient information leaflet invites all new patients to join. Clinical staff speak to patients they think may be interested in joiningand pass their details on to the practice manager.

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

2. Review of patient feedback

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

At our quarterly Patient Participation Group Meetings we aim to focus on topics which our patients have told us matter to them. We obtain this feedback via the NHS GP Patient Survey, from our CQC inspection report, review of comments and complaints received from our patients, by letter, email or verbally. The NHS Choices website, comments made by patients when completing the Friends and Family Test and discussions our clinicians and staff may have with our patients.

How frequently were these reviewed with the PRG?

Quarterly

3. Action plan priority areas and implementation

Priority area 1

Description of priority area:

We are aware that we have a considerable number of DNA's (patients who make, but fail to attend their appointments with either the doctor or the nurse).

We recognise that this is placing an additional strain on our appointment system and believe if we could raise awareness and reduce the number of DNA's, all our patients would benefit.

What actions were taken to address the priority?

We have nominated a member of the reception team to lead this project, as we feel someone who has direct contact and a personal knowledge of the patients is best placed to oversee this project.

It is our aim to reduce the current number of DNA's, thereby improving the level of service we are able to offer, together with the number of available appointments. However, it is not our aim to cause unnecessary distress to any of our patients, and we appreciate that there may be vulnerable groups within the practice, failing to attend their appointments, who it would not be appropriate to contact.

Actions:

- Publicising the number of DNA's each month and;
- Break this down to demonstrate total number of doctor and nurse hours which are wasted
- Introduce a text messaging appointment reminder service
- Publishing articles in our practice newsletter and on the website to highlight the problem
- Contacting a selection of those patients who failed to attend their appointment to try to ascertain why
- Perform regular audits of the clinical system with a view to identifying those patients who persistently fail to attend their appointments.
- These patients may then be reviewed on an individual basis, at our clinical meeting where any appropriate actions may be discussed.
- Review newly registered patients who DNA, as a letter or telephone call the first time they fail to attend may prevent this becoming a habit

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

As this will be an on-going project, actions, responses from patients, and hopefully improvements in the figures will be discussed at our PPG meetings and publicised on our website.

Priority area 2

Description of priority area:

Telephone system at the new Health Centre; we have had continual technical problems with the system since moving to the centre. This is frustrating for both patients and staff, and despite our best efforts and those of the technical support team, the volume of calls being received is still causing problems.

Actions taken to address the priority?

Aim: To relieve demand on system by:

- Encouraging patients to sign up for on line appointment booking
- Members of our PPG will assist with this
- We willprovide on line booking information to all new patients
- Encourage patients to telephone at less busy times for routine matters such as test results
- Provide additional cover at particularly busy times, to ensure prompt answering of calls. This may be achieved by:
 - \circ Using members of the admin team to assist
 - o Reviewing our reception staff cover
- We have approached the technical support team to see if they would be able to provide us with a call monitoring system in the reception area, such as those used in call centres, so we can see in real time how the system is performing.

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

Again this is an on-going project, we have obtained call figures from the date we moved into the Health Centre, and have asked the technical team to monitor our calls going forward and provide figures on:

- Calls answered
- Calls missed
- Caller waiting times

We are optimistic that the measures put into place will show improvements, we will continue to monitor the figures.

Priority area 3

Description of priority area:

We are now a very small part of a very large health centre. Because of this, we feel we are in danger oflosing the personal relationships with our patients which we have developed as a practice over the years.

What actions were taken to address the priority?

We are interested in the work being done by Dr Kate Granger the founder of the #hellomynameis campaign. Kate is a doctor who is suffering from terminal cancer. During a hospital stay she made the observation that many staff do not introduce themselves. She believes a friendly introduction is much more than a common courtesy. It is about making a human connection, beginning a relationship and building trust, and we believe this is an important part of supporting our patients and their carers.

- All members of staff introduce themselves by name when answering the telephone
- We are adding photographs of our staff, together with information about their role within the surgery to our website
- Going forward, we plan to include this information in our newsletters, concentrating on a different team each time i.e. Reception, Nurses, Administration staff etc.

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

We believe a personal touchimproves the level of care we provide, and hope we will receive positive feedback from our patients

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):

A member of the Patient Participation Group told us she felt there was a lack of support for those patients who receive a life changing diagnosis. Our survey indicated that faced with this situation, the majority of patients would welcome contact from the practice, either by telephone or letter with the offer of support or advice. This was discussed further within the practice and a member of the nursing team now contacts those patients she feels may benefit from the offer of support following diagnosis.

We have reviewed and amended our appointment system. Each day the on call doctor now has no pre-booked appointments; this enables him to see all those patients requesting an urgent appointment on the day. If a patient tells us they need to be seen urgently they will always be offered a same day appointment. In addition appointments are available to book up to 2 months in advance.

We have redesigned our website, our patients told us they would like more information, and to be able to download forms, we believe this is now much improved and offers our patients an improved on-line experience.

4. PPG Sign Off

Report signed off by PPG: Yes

Date of sign off: 26th March 2015

How has the practice engaged with the PPG:

Ensure our new website is regularly updated and encourage our patients to leave comments

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

We promote the Patient Participation Group to all patients registered with the practice, ensure our new website is regularly updated and encourage our patients to leave comments

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

We have received and noted feedback from; the GP Patient Survey, patient's comments and complaints, our CQC inspection report, Friends and Family Test comments and NHS Choices

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

The group agreed our priority areas and discussed our action plan

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

Our aim is to provide the best possible care for our patients, any changes or improvements we make have our patient's best interests at heart, and are guided by their suggestions. We believe appointment availability will increase, our telephone call handling system will be more efficient and our patients will benefit from a personal approach.

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

We are very grateful to, and would like to offer our thanks to, the members of our Patient Participation Group, we value the input we receive from you, and are extremely grateful for the time and effort you devote to sharing your experiences with us, advising us, and helping us improve the service we provide.

We are pleased thatmany of our patients feel they are free to offer informal verbal feedback, both positive and negative, your comments are always noted, taken to and discussed at our practice meetings.

We would also like to thank those patients who take the time to tell us when we get it right, who let us know that they are satisfied with our endeavours and the service we provide. Our team work extremely hard and it is heartening to receive positive comments.

Thank you.