

Annex D: Standard Reporting Template

Thames Valley Area Team
2014/15 Patient Participation Enhanced Service – Reporting Template

Practice Name: Little Chalfont Surgery

Practice Code: K82621

Signed on behalf of practice: Sue Hughes Practice Manager

Date: 20.03.2015

Signed on behalf of PPG: electronically signed

Date: 30.03.2015

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

Does the Practice have a PPG? YES																																					
Method of engagement with PPG: Email																																					
Number of members of PPG: 16																																					
Detail the gender mix of practice population and PPG: <table border="1" style="margin-left: 20px; width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 15%;">%</th> <th style="width: 35%;">Male</th> <th style="width: 50%;">Female</th> </tr> </thead> <tbody> <tr> <td>Practice</td> <td style="text-align: center;">2623</td> <td style="text-align: center;">2843</td> </tr> <tr> <td>PRG</td> <td style="text-align: center;">9</td> <td style="text-align: center;">7</td> </tr> </tbody> </table>	%	Male	Female	Practice	2623	2843	PRG	9	7	Detail of age mix of practice population and PPG: <table border="1" style="margin-left: 20px; 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 style="text-align: center;">1332</td> <td style="text-align: center;">433</td> <td style="text-align: center;">568</td> <td style="text-align: center;">794</td> <td style="text-align: center;">949</td> <td style="text-align: center;">620</td> <td style="text-align: center;">404</td> <td style="text-align: center;">366</td> </tr> <tr> <td>PRG</td> <td style="text-align: center;">0</td> <td style="text-align: center;">1</td> <td style="text-align: center;">0</td> <td style="text-align: center;">2</td> <td style="text-align: center;">2</td> <td style="text-align: center;">7</td> <td style="text-align: center;">1</td> <td style="text-align: center;">3</td> </tr> </tbody> </table>	%	<16	17-24	25-34	35-44	45-54	55-64	65-74	> 75	Practice	1332	433	568	794	949	620	404	366	PRG	0	1	0	2	2	7	1	3
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Detail the ethnic background of your **practice population** and PRG: **practice population is according the numbers coded and may not be a true indication of actual numbers**

	White				Mixed/ multiple ethnic groups			
	British	Irish	Gypsy or Irish traveller	Other white	White &black Caribbean	White &black African	White &Asian	Other mixed
Practice	664	10						
PRG	12	1						2

	Asian/Asian British					Black/African/Caribbean/Black British			Other	
	Indian	Pakistani	Bangladeshi	Chinese	Other Asian	African	Caribbean	Other Black	Arab	Any other
Practice	141									
PRG	1									

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:

In order to make the Little Chalfont Patient Participation Group (PPG) representative of our practice population, we took the following steps to engage with our patients and invite them to join the PPG:

Via the practice website, www.littlechalfontsurgery.co.uk , patient screens in reception waiting areas, notice board or patients are asked to join by members of staff.

All patient respondents are invited to be part of the “virtual” PPG and join through the website.

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

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

The majority of our members are commuters or retirees.

2. Review of patient feedback

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

Feedback has been received via the surgery website, patient letters, telephone calls and FFT

How frequently were these reviewed with the PRG?

Twice.

3. Action plan priority areas and implementation

Priority area 1 - 6

Description of priority area:

E Mailing

From the survey patients are looking for e mail access which we do not currently provide. However a system of “secure messaging” is in the process of being set up and will become available to all patients within the next few weeks. (It is available to patients who already use our online prescription services).

Texting

Text messaging has proved to a great success and the collection of mobile numbers is an ongoing task so that we can enhance our appointment system further reminders via text messaging. We also aim to use this system to remind patients in advance that they are due annual reviews.

Appointments on Online:

In last year’s report we announced we would be looking in to providing this service and we can confirm that this service will be up and running and available through our website from May onwards. Members of the PPG group will be sent instructions of how to use the system when it is ready for use and will be asked to report back to the surgery before full implementation.

Information screens:

The screens have proved to be an asset for patients who have an appointment and provide a variety of information. Following our review of the survey

and comments made verbally they are certainly beneficial but again we feel we can enhance their usage. We are looking to customise messages more for our patients alongside the global messages that currently appear.

The Surgery Website

This source of communication is proven to be the way in which the majority of our patients look up advice and information regarding our services. Again the survey shows that we are in need of further work in keeping this site updated. Plans for this will involve more links for patients to help with the management of self-limiting illnesses.

Telephones

The survey did not include questions regarding this form of communication as the system is in the process of being upgraded as we are aware of its' current failings. The 360 degree survey will include questions about the new telephone system which is due to in operation for May 2014.

What actions were taken to address the priority?

The action plans for this year were for:

Emailing - the surgery have as indicated in the last report set up secure messaging and this has been used by those patients registered for online services

Texting - Continued contract with texting provider; Collection of mobile telephone numbers.

Appointments on line/cancellation of appointments on line – All “routine” appointments for GPs have been made available on line and once released are accessible by the patients registered for online services.

Information Screens – DoH/NHS England messages continue to be changed regularly alongside customised messages relating to the surgery.

Surgery Website – Updated regularly by Practice Manager.

Telephones – A new telephone system has been installed and has enhanced the patient experience 1) Patients can leave messages to cancel appointments Out of Hours ; 2) The system allows us to offer advice whilst the patient waits to be spoken to and we have been told by patients for example that advice to go to a chemist has been the correct thing to do, saving the patient and the surgery time; 3) the call recording feature we believe is beneficial to patients and staff; calls can be listened if there are perceived difficulties with service provision and this has led to improved customer service; 4) the waiting times have not necessarily been reduced but the advanced system helps us to understand our call volume and we have been able to explain to patients how many calls were queuing, helping them to understand how busy we are at certain times of day/week; 5) the system provider is more efficient when dealing with line failures and calls are rerouted within minutes causing less inconvenience to patients.

We feel the new telephone system has had a great impact for our patients.

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

Emails -Patients can simply add a message via on line service, to be dealt on a non-urgent basis to which we can reply with actions taken. Impact – less footfall into surgery – publicised on website, screens and when they register for online services.

Texting -Patients whose mobile telephone numbers are recorded receive texts a couple of hours after making an appointment and 24 hours before they are due to be seen at the surgery. Patient groups are contacted by text advising them of services available e.g. smoking cessation, that their blood pressure check is due, and for urgent contact we have used texting – patients find this very useful and have verbally told reception they like the system. Publicised on website, screens and when they register for online services.

Appointments on line/cancellation of appointments on line - For those patients who work full time or have busy schedules this has proved to of great value to them. Publicised on website, screens and when they register for online services.

Information Screens – These have continued to prove an asset to communicating with patients, they are changed on a monthly basis with current promotions from the DOH and surgery/local matters. Patients have stated that they have actually changed habits i.e. gone to pharmacy for advice where appropriate; carers have come forward and have been registered as a carer; local free parking announced. (Not publicised)

Surgery Website - Continues to be used more and more by patients. New patients use the site to register through and comment on how user friendly it is. Publicised in leaflet and by word of mouth.

Telephones – As listed above, points 1- 5 have had a great impact for patients and the surgery.

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):

PATIENT PARTICIPATION MARCH 2012

Issues of importance to patients from the survey:

- 1) Booking on the day for appointments was most important overall
- 2) Booking appointments in advance
- 3) Seeing their usual doctor
- 4) Knowledge of services available at the surgery.

With the above in mind we set about planning quality information about appointment and clinician availability on our website.

No service provision changes were requested for implementation but we were considering:

- a) the introduction of phlebotomy in house, to save patients travelling to hospital for their bloods
- b) ordering prescriptions on line

Issues of importance the PPG group - To strive to increase in prominence and number the members of the PPG.

PATIENT PARTICIPATION MARCH 2013

The survey for 2013 continued with the theme of 2012 and was geared to looking at the services we were offering, some, newly introduced and some we would like to propose, in order to enhance the experiences of our patients.

Services already introduced -phlebotomy in house and online ordering of prescriptions, patient information screens – this survey had positive feedback for these services.

Proposals were for:

- 1) Texting: this survey indicated that our patients were unsure of the values this would hold for them, but as the months went by the feedback was very positive indeed.
- 2) To Book Appointments on Line: From only a few initial appointments available we now make all routine GP appointments available.

Patient experience:

Patients reported back that would like to be able to see the GP of their choice.

As a training practice we were aware that patients were not always as happy to see a GP registrar but our policy was and has remained that if a patient requested a specific GP they would be granted that choice. It is rare that patients query this and most embrace the service the “young new doctors offer”!

4. PPG Sign Off

Report signed off by PPG: YES/NO

Date of sign off:

How has the practice engaged with the PPG: YES

How has the practice made efforts to engage with seldom heard groups in the practice population?
Our website and patient screens offer information for patients to participate as members of the PPG; via the website patients can inform us of any issues they may have without being affiliated to the group. Also and in particular, our reception staff engagewell with our patient population who they encounter face to face or by telephone and if necessary will act as advocates, without prompting, to those less able than others.

Has the practice received patient and carer feedback from a variety of sources?*We receive feedback on our website, verbally and in writing (most recently via Friends and Family Test).*

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?*Services provided to our patients have been enhanced year on year using the latest technology for those privileged and able to use it. Carer's valuable time has been saved by these services but no cost to those unable to access the technology. New computing systems have led to a more efficient provision of services all round.*

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