

Annex C: Standard Reporting Template

Schedule M

Hertfordshire and South Midlands Area Team
2014/15 Patient Participation Enhanced Service – Reporting Template

Practice Name: Linden Medical Group

Practice Code: K83036

Signed on behalf of practice: Peter Billingham – Manager



Date: 26.3.2015

Signed on behalf of PPG: *Alfreda L. Davis* (MRS ALFREDA DAVIS)

Date: 26.3.2015

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): Face to Face, email
Number of members of PPG: The online group was established in 2014 and currently has 51 members. The face to face group was established in 2007 and currently has 15 members.

Detail the gender mix of practice population and PPG:

%	Male	Female
Practice	48.9	51.1
PPG	33.3	66.7

Detail of age mix of practice population and PPG:

%	<16	17-24	25-34	35-44	45-54	55-64	65-74	> 75
Practice	20.7	9.3	12.1	13.3	15.2	11.1	10.5	7.8
PPG	0	22.7	24.3	13.6	7.6	12.1	15.2	4.5

Detail the ethnic background of your practice population and PPG:

	White				Mixed/ multiple ethnic groups			
	British	Irish	Gypsy or Irish traveller	Other white	White &black Caribbean	White &black African	White &Asian	Other mixed
Practice	63.7	.6	0	16.6	.9	.9	1.9	1.6
PPG	76.5			13.7				

	Asian/Asian British					Black/African/Caribbean/Black British			Other	
	Indian	Pakistani	Bangladeshi	Chinese	Other Asian	African	Caribbean	Other Black	Arab	Any other
Practice	3.7	.2	.1	.9	3.7	2.4	.5	2.2		.1
PPG	5.9				1.9	1.9				

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:

Whilst ethnicity has been recorded for several years by the Practice there are still a majority of the practice of the practice population where there is no ethnicity recorded or where the patient has declined to state the information. The majority of those where no information is recorded are long standing patients on the patient list prior to commencement of recording ethnicity.

The practice website has an inbuilt translator to enable those patients where English is not their first language to interact with the site and to better access our services and information.

The practice has had a face to face patient group for several years, acknowledging that not all groups would be able to meet during working hours the group discussed the formation of an online group.

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-house Patient Survey, NHS patient surveys, initial F & F test information. Annual Patient Complaints statistics

How frequently were these reviewed with the PRG?

The in-house survey is held annually and the results discussed with the PPG, in future with the ongoing F & F info we will review this info quarterly. Review of NHS patient survey results discussed when available.

Patient complaint stats and outcomes are discussed annually.

3. Action plan priority areas and implementation

Priority area 1
<p>Description of priority area:</p> <p>Reception Staff Training - to improve our performance with specific regard to improving satisfaction rating amongst patients</p>
<p>What actions were taken to address the priority?</p> <p>The practice has been working with external trainers and other resources to improve the service to patients, both in terms of individual performance of members of the reception team and looking to ensure consistency in all our communications.</p> <p>All reception staff receive ongoing support and review from the Reception Manager who monitors performance. The Reception Manager meets regularly with an external trainer to support her in coaching staff and to plan group training for the team. This has involved listening to call recordings of patient phone calls, as well as teaching techniques and strategies for dealing with difficult and challenging behaviours.</p>
<p>Result of actions and impact on patients and carers (including how publicised):</p> <p>The practice carried out a survey during 2014, members of the PPG attended on various days and times to encourage</p>

participation. A total of 227 surveys were completed by patients.

One of the questions asked was:

How do you rate the way you were treated by the receptionists at this practice?

	<u>2014</u>	<u>2013</u>	<u>2012</u>
Result - Very poor	1.1%	0.5%	1.4%
Poor	0.5%	1.4%	2.9%
Fair	14.8%	10.8%	13.3%
Good	26.5%	30.4%	32.3%
Very good	31.2%	38.4%	32.9%
Excellent	25.9%	18.4%	17.1%

It can be seen that the scores provide a mixed picture with those scoring Very Good or Excellent increasing slightly from 56.8% to 57.1%, whilst those scoring fair or good staying similar overall. It is clear that there is still work to be done in this matter however the general improvement since the 2012 survey (the last one before we started the new round of reception training) has been maintained.

The Practice will continue to work with its training resources to identify best practice by reception staff that has resulted in the increase in 'Excellent' scoring and to use this to train all staff.

Results of the survey are publicised in practice and on the practices website.

Priority area 2

Description of priority area:

Improving the availability of 'On the day' appointments for patients with urgent medical conditions

What actions were taken to address the priority?

During 2013/14 the Practice examined its appointments systems to identify how we could within the available resource envelope improve on our urgent care offering. The decision was taken to recruit additional qualified Nurse Practitioner time to reduce the demand for GP appointments and allow us to deal with minor illness more appropriately.

Throughout 2014/2015 the Practice had 4 qualified NP's offering 'On the day' urgent care appointments; this allowed us to cover each weekday. In order to properly route patients to the appropriate clinician reception staff were requested to obtain a very brief description of the nature of the problem, this allows Reception to check the appointment is appropriate to a NP or requires a Duty doctor appointment. This has not always been well received by a minority of patients, but when it has been explained why they are being asked and that the receptionist is not making any clinical judgement on the need for the patient to be seen and only using the information to route the patient appropriately, it is generally accepted.

In late 2014 the practice surveyed patients on their ability to obtain an 'on the day' appointments at the practice, the results were as follows:

Yes 70.9% No 29.1%

We also asked the patients what they did if they were not able to get an on the day appointment, with the following results:

Accept an appointment for a later date	63.1%
Contacted NHS 111 Service	9.2%
Attended Corby Urgent Care Service	4.3%
Attended A&E (casualty)	4.3%
Didn't get to see a doctor or nurse	11.3%
Spoke to a Pharmacist	7.8%

It can be seen that almost two thirds accepted an appointment offered at a later date, with a further 25.8% seeking assistance from an alternative advice line or care provider. It is not possible to draw any conclusion from this data as to whether the 4.3% that went to A & E were appropriate or had been directed there by the surgery in accordance with protocols.

The practice has made available on its website and in print form general advice on the appropriate course of action for patients in terms of on the day care needs.

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

During 2014 we changed the way that it identified and sign posted carers registered at the Practice, we gave a member of staff specific responsibility to improve our service to carers and supported the development of new initiatives. At a recent event held by Northamptonshire Carers Association the Practice was been given a Bronze Award for identification and offering services and onward referral for carers, our carers administrator also received the Shining Star award to acknowledge the innovation, enthusiasm and hard work that they had personally devoted to this project over the last 12 months. Part of the enhanced service to carers is to make identification easier for practice staff so that they can be offered greater flexibility when booking appointments. Information about our services to carers is available on our

website, in print from reception and highlighted on notice boards. In addition information is featured in our periodic patient newsletter.

The partners have reviewed the current arrangements and examined the data on appointment availability. The practice is currently seeking to appoint an additional GP to improve services to patients and relieve stresses in the system. Locally there are serious difficulties in recruiting GP's and the practice has been utilising long-term locum GP's to assist until a new GP can be permanently appointed.

Information relating to GP sessions and other staffing is regularly discussed with the patient group and included in patient Newsletters in print and on the website.

Priority area 3

Description of priority area:

To hold themed patient events to provide information on health and fitness and to improve patient awareness

What actions were taken to address the priority?

The practice had previously held a number of themed events to raise awareness of particular health areas, such as respiratory disease, ageing and the support available etc. These have been very well received by those that came along but not very well attended.

It was decided to hold a further event in 2014 on the theme of 'General Health Awareness Day', the purpose of the event was to promote good diet, fitness and provide information to patients on services available. As with previous events number of other agencies were involved to offer advice and arrange further onward referral. Information or testing was available on quitting smoking, healthy eating, medication management, cholesterol checking, peak flows testing, blood pressure etc. In addition the practice nurses were on hand to offer further health advice.

The event was advertised within the practice by numerous means, poster, website, flyers etc. as well as externally in local publication, libraries etc.

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

Unfortunately, despite the best efforts of all concerned and greatly increased advertising turnout was again very

disappointing. The exit surveys carried out once again showed that those that attended found the event useful, however the numbers attending did not justify the effort required by practice staff and others to make it happen.

The decision was taken that we would not hold a similar event again, but would perhaps look in future to how we can raise awareness of these issues in different ways.

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):

During 2014/15 the PPG met on the 30th April, 21st May, 3rd September, 19th November and the 19th March 15.

The topics discussed included:

- **Planning the Patient event**
- **Building improvements planned for the surgery**
- **The Flu vaccination campaign**
- **The Friends and Family test and how to encourage take up**
- **The 2014 patient questionnaire**
- **Practice staffing and the difficulties in recruiting**
- **Primary care commissioning & contracts**
- **Reception Staff training programme**

The practice regards the PPG as an important part of its operations, the members of the face to face PPG have also acknowledged the fact that only a few of the local practice still to have face to face groups.

The establishment of a virtual group has enabled us to interact with a group of patients with a very different demographic profile, involving the online group continues to be a challenge but we do use the contact details to send information and news and invite them to take part in surveys etc.

4. PPG Sign Off

Report signed off by PPG: **YES**

Date of sign off: **26.3.2015**

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

How has the practice engaged with the PPG:

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

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

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? **YES**

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

The practices commitment to facilitating a regular face to face PPG group should be noted, this group continues to grow in strength.

We have an excellent Manager at the practice with a good team behind him; they listen to the PPG and make improvements.

Please return this completed report template to england.enhancedservices-athsm@nhs.net no later than 31st March 2015. **No payments will be made to a practice under the terms of this DES if the report is not submitted by 31st March 2015.**