

Patient Participation Report 2014/15

Practice Name: **Strouts Place Medical Centre**

Practice Code: **F84051**

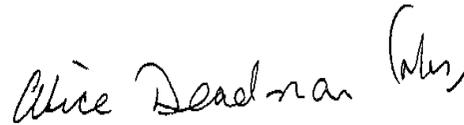
Signed on behalf of practice:



(Practice Manager)

Date: 27.03.2015

Signed on behalf of PPG:



(Chair of PRG at SPMC)

Date: 27.03.2015

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

Does the Practice have a PPG? **YES**

Method(s) of engagement with PPG:

There are various methods of engagement we used with our PPG. Significantly it was face to face, engaging the patients to speak with us face to face in our quarterly meetings which we held at the practice. Another method of engagement was through the use of emails, we regularly contacted our patients through emails and updated them regarding the issues at the practice and information related to the PPG meetings. In addition, we also engaged with them through the use of telephones, we spoke to the patients through the phone to give our patients updates and also invite them to participate.

Another significant method of engagement was we have an open invitation for patients to join our PPG group; we have posters displayed all over our reception area. On those posters it states that if patients are interested in giving their views, they can join our PPG group and it states that we are ensuring that the practice provides the services our patient's needs. Therefore this is a form of engagement as we encouraged our patients to give their views on how the practice is doing.

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We also have leaflets which are kept at reception which contains more information regarding the PPG group, what it entails and how patients can participate in the group. Finally when patient generally give feedback about our practice, we encourage them to participate in the PPG group. Furthermore on our practice website there is a whole section regarding the PPG where patients can find out more details on how to become a member or share their views about the quality of care they receive.

Another effective way we engaged patients was when we registered new patients we invited them to participate in our meetings, and to participate in the PPG. We also handed patients that attend infrequently at the practice a leaflet about the PPG.

Number of members of PPG: **40**.

Detail the gender mix of practice population and PPG:

%	Male	Female
Practice	57	43
PRG	60	40

Detail of age mix of practice population and PPG:

%	<16	17-24	25-34	35-44	45-54	55-64	65-74	> 75
Practice	15	20	23	20	12	5.5	2.5	2
PRG	0	10	15	28	20	17	5	5

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	0.67%	0.67%	0%	24%	0.70%	0.67%	0.40%	1.25%
PRG	10%	0%	0%	0%	2.5%	2.5%	2.5%	2.5%

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	Asian/Asian British					Black/African/Caribbean/Black British			Other	
	Indian	Pakistani	Bangladeshi	Chinese	Other Asian	African	Caribbean	Other Black	Arab	Any other
Practice	1.25%	1%	61%	0.85%	2.15%	0.67%	0.067%	1.29%	0.50%	2.37%
PRG	0%	2.5%	75%	2.5%		0%	0%	0%	0%	

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:

There are many steps that have been taken to ensure that the PRG is a representative of the practice population for example we invited everyone from all different background from age group to ethnicity and made sure their voices were heard in an equal and just way so we ensure that everyone's voice and opinions is represented and reflected in order to better serve the needs of our patients. We ensured that the leaflets and posters related to the PPG kept at reception were open for everyone, from all different background, age, gender and ethnicity. This ensured that only everyone was invited and not only certain groups. In addition, patients who attend infrequently to the practice after they finished their consultation with the doctor we handed over leaflets regarding the PPG inviting them to participate. We also made links with our disabled patients as we invited them with their carers so that their views are represented. Another important step we took so that everyone can participate in the PPG is the timings of the meeting had to be considered.

2. Review of patient feedback

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

There were numerous sources of feedback that were reviewed during the year. Firstly we receive feedback from our patients through NHS choices website. This is all the complaints and positive feedbacks that have been written by patients regarding the practice. We

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also have our internal diabetic survey which our patients complete after seeing our practice nurse for the diabetes reviews and check-ups. We have considered the feedback and the survey result we have received from GP patient survey. The FFT survey, newly introduced by NHS England, is also a significant source of feedback; this is a survey that we give to our patients after they have finished their consultation with a clinician and is anonymous. Furthermore we also receive feedback for FFT test through iPlato where patients message their comments and opinions through text messages. Also iPlato then regulates a monthly report from the feedback they have received from our patients. Furthermore we have the reviewed feedback from the CQC reports after their visit in our practice on 17th December 2013.

How frequently were these reviewed with the PRG?

They were reviewed every quarterly with the PRG.

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3. Action plan priority areas and implementation

Priority area 1

Description of priority area:

Our first priority area was updating our practice website. We received a huge recommendation from our patients regarding our website. Patients wanted to see a more modern up to date practice website with more facilities, something for the patients to go onto and easily access. The PRG group has agreed the priority area during the PRG meeting at our practice.

What actions were taken to address the priority?

There were several actions taken to address the priority issue which was updating our website. In the meeting with the Patient representative group, they agreed amongst themselves that they would like to see a brand new up to date website. We received suggestions regarding what they would like to see on our website. We carried out an internal survey to understand more about their choice. We tried to find out if patients were aware of our website, how often they go onto the website; we asked them how they would like to see the website updated what kind of facilities they would like for our website to entail. We asked them general questions regarding the website, and left it an open forum for the members of the PRG to discuss about the practice website. We wrote down the feedback they gave us and their opinions and the decision they made as a group regarding updating the website.

After taking in the feedback and recommendations from the patients we contacted a private contractor to help create a brand new website for our practice.

Finally we implemented the website after the recommendation of patients. After we implemented the website, we held our PRG meeting to publicise our website for their opinion and feedback. We reported back to the PPG in the meeting that we have implemented what they wanted.

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

Creating and updating our new website has had a huge impact on our patients and carers, from the feedback we received in our meetings with the PRG they are happy with the changes on the website. The patients find the website accessible, better to look at and there are more facilities for the patients to look into. We publicised the new website to our patients in our PRG quarterly meetings. We also advertised this in our surgery encouraging patients to go onto our website and give us feedback regarding the new website and what further changes we can make. We also sent text messages to our patients to encourage them to look into our new website which we implemented. Another impact it has had on patients is that because the website is better designed, they are happy to use it more regularly than before. Also the fact that there are now more options for patients, so they can now deal with issues related to their health through our website. This has had a significant impact as patients feel more in control as they can now go onto our website and request for things such as repeat prescription requests.

We publicised that we have implemented a new website through the PPG meetings. We also posted the new changes/information on our noticeboard in the waiting area. Furthermore we also informed patients face to face when they arrived at the practice. Furthermore we have informed patients over the telephone when they call and raise the query. In addition we informed patients through SMS messages.

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Priority area 2

Description of priority area:

Secondly the key priority issue was increasing capacity for phlebotomy sessions. Patients wanted more sessions so they can have their blood tests carried out in our practice. The priority area agreed by the PRG members during the meeting at the practice.

What actions were taken to address the priority?

There were numerous actions taken to address the priority. Firstly we noted that our patients agreed in the PPG meeting that they wanted to see more sessions for having their blood tests taken. We discussed with the patients and involved them in how many sessions they would ideally like to have, what days is best for the patients to have their bloods taken at the practice. After taking the patients feedbacks and recommendations, this was then discussed with the phlebotomist who carries out the blood tests and the general practitioners of the practice. We held a meeting with them and the decision was to increase another session so patients can access this service at our practice. We increased the capacity for phlebotomy sessions. An extra session for blood tests was implemented for our patients use. After the implementation of the extra session, we held a PPG meeting in which the patients were informed actions have been taken due to their decision and the service they wanted we have implemented extra sessions for them.

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

A significant result of implementing an extra phlebotomy session has impacted our patients and carers positively. This is because there are now more frequent appointments available at the practice so patients can have their blood tests taken here. There are now more options for patients to decide which date and time is suitable for them to come in for their blood tests.

Another impact as a result of having an extra phlebotomy session is patients don't have to travel to go to hospitals in order for them to take their blood tests; they can do it at their local practice. This is so much more convenient for the patients. Having more availability means patients have more choice when booking their appointment for their blood tests. This new change to the phlebotomy clinic at our practice has had a positive impact and has been published through the feedbacks we have received in the PPG meetings.

We publicised that we have implemented extra sessions for phlebotomy at the practice through the PPG meetings. We have posted the information on our practice website. Furthermore we also posted the new changes/information on our noticeboard in the waiting area. We also informed patients face to face when they arrived at the practice. Also over the telephone when patients call and raise the query. In addition we informed patients through SMS messages.

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Priority area 3

Description of priority area:

Thirdly we increased the sessions for our Practice Nurse Margaret. Our patients wanted an increase in her sessions due to high demands. The PRG members are agreed this issue as a priority area in the PRG Meeting at the practice.

What actions were taken to address the priority?

The actions that were taken to address this priority was this issue was discussed in the PPG meeting, where patients agreed that they would like to see more sessions with their practice nurse. She used to do three fixed days, patients wanted extra days so it enables them flexibility and it meets their needs. During the PPG meeting patients identified this was a key issue for them and we received a lot of feedback regarding this. The patients agreed in the meeting that they would like for Margaret (PN) to increase her sessions.

We then spoke to the practice nurse and increased her sessions due to the patients demands. She is now available five days Monday-Friday. We then informed the patients in the follow up PPG meeting that we had implemented what the patients wanted. Margaret has increased her sessions so therefore there is now more availability with the practice nurse. The patients were very satisfied with the changes.

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

The result of actions and impact it has had on the patients and carers since increasing the sessions for the practice nurse has been an effective one. There are now more appointments available with the practice nurse so the patients have more choices on

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when to come and see the practice nurse. We have been able to meet their demands for the appointments for the practice nurse. The practice nurse is now able to see more patients related to dressings, contraceptive pills, health checks and routine blood pressure checks. This has had a positive impact as the patients are now able to see the practice nurse for minor medical and health related problems. The increase in the practice nurse's session has been publicised in the PPG meeting where we have received positive feedbacks from the patients, as before patients didn't have much choice and option when booking an appointment with the practice nurse.

We publicised that we have implemented extra sessions with the practice nurse at the practice through the PPG meetings. We also posted the new changes/information on our noticeboard in the waiting area. In addition we also posted the information on our website. We also informed patients face to face when they arrived at the practice. Also over the telephone when patients call and raise the query. In addition we informed patients through SMS messages.

Progress on previous years

Is this the first year your practice has participated in this scheme?

NO

If you have participated in this scheme for more than one year, outline progress made on issues raised in the previous year(s):

Issues that were raised during the previous years were maintaining fixed patient doctor relationship. There are three doctors who are permanently available for patients to see if they choose to. Therefore the patients have been able to see a fixed doctor who they feel comfortable with and many patients have reported that this has improved vastly as they are now seeing the same doctor they want to see. We have had excellent feedback from our patients as they stated that they are comfortable with the doctor they are seeing. And the patients have built a trust with their chosen GP.

Another issue that was raised previously was being able to book their appointment with the doctor through other methods instead of the telephone. This has been achieved as we are now doing patient online access, where patients are managing their own appointments through online booking. Patient therefore can be given the access to choose their appointment time and date by booking it online. We have received excellent feedback for this as our patients feel that it is an effective and easier way for them to arrange their own appointments online, through the website.

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4. PPG Sign Off

Report signed off by PPG:

YES

Date of sign off: 27.03.2015

How has the practice engaged with the PPG:

The practice has engaged with the PPG through various methods. We have effectively engaged with them through the set-up of our quarterly meeting, patients have been invited everyone from all different background from age group to ethnicity and made sure their voices were heard in an equal and just way so we ensure that everyone's voice and opinions is represented and reflected in order to better serve the needs of our patients.

The practice has ensured posters are posted at reception stating that all patients can join the patient participant group, it is open to everyone. We also have leaflets which are kept at about the patient participant group and how they can participate. There is also a small box kept at reception where patients can leave their email addresses and contact details so we can contact the. We also engaged with them through emailing updates and information about the practice and any suggestions they have. In addition, we invited the PPG to communicate with us through the telephone; we called them to invite them to the meetings. Furthermore they were also able to speak to any members of the staff separately regarding issues related to the practice.

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

The practice has made many efforts to engage with seldom heard groups in the practice population. For example we gave time to the people that find speaking in English difficult. As a practice we have a large population that are Asian Bangladeshi who find it difficult to communicate in English. Therefore we invited them to the PPG meeting and had an interpreter present so their views were heard and represented.

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Another way we made efforts to engage with seldom heard groups is that we invited our disabled patients and patients with chronic illnesses. This was through asking their carers to bring them into the meetings so that any issues that our disabled patients/chronic illness patients are having, we can make sure their needs are being met and represented. With our hearing impaired patients we have used the use of emails to communicate with them, they gave us written feedback and any issues they had regarding the practice. Thus their views were represented.

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

The practice has received patient and carer feedback from a variety of sources. This includes the suggestion box which we keep at reception for GP patient survey. Patients have left feedback and comments regarding the practice. We also have an internal survey for diabetes in which patients filled up those surveys after having their reviews done with our practice nurse. In addition we received feedback from NHS direct website where patients have viewed their opinions and complaints regarding the practice. Furthermore after patients finish their consultations with doctor/clinicians we encourage patients to give feedback through the FFT surveys. We also have Iplato in place in which patients receive text messages for their feedback about the service they have received at our practice. We have looked at the monthly reports Iplato circulates for the practice. We have also got feedback from the CQC report.

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

The PPG was heavily involved in the agreement of priority areas and the resulting action plan. The PPG members as a group agreed together the priority issues they would like to be addressed and implemented in our surgery. This was agreed in the meeting's we held at the practice. The PPG members came together to discuss their priority issues and what was their main concern and they all came to an agreement that they would like a brand new website for the practice, more phlebotomy sessions and extra sessions with the practice nurse. They were also invited back to the next meeting to inform publicise the priority issues they agreed on that has been implemented. We took in their positive and good feedbacks, however some of the patients suggested that the website should be easier to grasp, therefore the website now has subheading and titles for patients to look through. In addition patients have also been advised to continue to give feedback regarding the website.

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

The services we offer to patients and carers have improved significantly. This is because after implementing our new website, it is patient friendly and patients find it easily accessible. The website now has up to date information regarding the practice so therefore patients can find out details, information and bulletins regarding the practice, Patients can now have more control in viewing their opinions as they can leave feedback on the website, they can read up information about the staffs and clinicians. They can also order their repeat prescriptions through our website; it is now more modern and gives our patients a fresh outlook about the practice. Secondly the service offered to patients and carers improved as result of implementing extra sessions for phlebotomy means patients can now have more choice regarding when and what time they want to book their blood test appointments, more availability and appointments available. There is far more access so this is definitely a vast improvement. After implementing more sessions we have received less complaints regarding blood tests appointments and not having enough sessions. Patients are happy that they do not have to travel far to hospitals to carry out their blood tests as they can come into the surgery which is local to them. Furthermore after implementing the action plan of increasing the practice nurse's session's, patients are now able to have more options when booking their appointments, they can also come and see a practice nurse for minor health related issues instead of waiting to see a doctor. Patient's demand has been met.

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

The PPG is a great platform for us as a practice to hear feedback from our patients. It is an effective way in involving our patients in decision making regarding the services at the practice. It also means patients are engaged with any changes the surgery implements as the patients are the one who decide what is best for their care and needs. Therefore you can get real accounts into what patients really want from the practice and what services we can improve on. It is forum for patients to discuss and view their opinions and more importantly make decisions on what they want for their practice.