

Annex D: Standard Reporting Template

Taken from; GMS Contract 2014/15, Guidance and Audit requirements, NHS England Gateway reference: 01347

East Anglian Area Team
2014/15 Patient Participation Enhanced Service Reporting Template
to england.ea-PPGDES@nhs.net

Practice Name: St George's Medical Centre

Practice Code: D81021

Signed on behalf of practice:



Date: 25th March 2015

Signed on behalf of PPG/PRG:



Date: 25th March 2015

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

Does the Practice have a PPG? YES / NO	Yes
Method of engagement with PPG: Face to face, Email, Other (please specify)	<i>Face to face, website and email</i>
Number of members of PPG:	<i>All registered patients are members of the PPG. Email group currently stands at 86</i>

Detail the gender mix of practice population and PPG:			Detail of age mix of practice population and PPG:								
%	Male	Female	%	<16	17-24	25-34	35-44	45-54	55-64	65-74	>75
Practice	4978	5033	Practice	1988	786	1373	1359	1459	1158	1061	827
PPG			PPG								

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	7864	28	0	449	6	16	15	20
PPG								

	Asian/ Asian British					Black/African/Caribbean/Black British			Other	
	Indian	Pakistani	Bangladeshi	Chinese	Other Asian	African	Caribbean	Other Black	Arab	Any Other
Practice	36	3	11	7	38	20	4	0	0	6
PPG										

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:

All registered patients are deemed to be a member of the PPG. All patients who contact the surgery via email are added to the "Virtual PPG". There is an opt-out clause on all emails sent to this group only one person has requested to be removed from this list.

If we conduct a general patient survey we would run computer searches and use the computer to randomly select the patients to ensure representative distribution in line with the Practice Profile.

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 (Lesbian Gay Bisexual Transgender) community? YES/NO

No although we do have two nursing homes and three residential homes in our area. Each home has supplied an email address which is included in our virtual group.

2. Review of patient feedback

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

- *Patient complaints*
- *Verbal comments*
- *NHS Choices*
- *Friends and Family replies*
- *Patient Survey*

How frequently were these reviewed with the PPG?

The managers and doctors discuss any complaints on a weekly basis. The managers identified three common areas to discuss at the PPG meeting on 10th November 2014. In view of the poor attendance at this meeting, it was agreed that the priorities should be shared with the “virtual” PPG email group for comments. The email was sent to the PPG email group on the 12th November 2014 with a copy of proposed priority areas. No replies or comments were received.

3. Action plan priority areas and implementation

Priority area 1

Description of priority area:

Independent Pharmacy situated in the surgery building.

We received verbal and written complaints following the sudden closure of the pharmacy. There was also a report with patient's concerns in the local paper.

What actions were taken to address the priority?

Immediately it was known that the Pharmacy would be moving from the premises, notices were put into waiting room, outside the building and on the website. Further information and guidance about replacement pharmacies was added to the repeat prescription screen for patients that request their medication via the website.

The Out of Hours provider and local pharmacies were also informed to highlight possible contact from patients following the closure of the pharmacy.

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

Disruption was minimised. Dispensary staff assisted patients to make new choices regarding a new provider for their repeat prescriptions. The option of the pharmacy was removed from the list of service providers, minimising the risk of a patient selecting them and their medication not being supplied.

Priority area 2

Description of priority area:

An anonymous complaint was posted on the NHS Choices website about poor support for new mothers and problems with the vaccination clinics. We have also received verbal comments about a suitable area for nursing mothers when attending the vaccination clinic.

What actions were taken to address the priority?

We identified a suitable room that would be available for mothers to change/dress/feed their babies on the afternoon of the vaccination clinic as we were told that many mothers liked to feed their babies following immunisation.

The complaint was discussed with the nurses who run the immunisation clinic and the PPG group (10/11/14) and it was decided to conduct a small survey of mothers to ascertain their views of how the service runs and any suggested improvements.

The month of February was identified and the parents of all babies/children with an appointment for the immunisation clinic were either given or posted a questionnaire. It was also available online via our website. 79 questionnaires were printed. 19 were returned with 2 online returns.

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

The nurses conducting the vaccination clinic tell the mothers about the area for feeding or changing their baby.

A copy of the questionnaire results were published on our website. A synopsis of the results was put onto our electronic notice board in the waiting room. The results were shared with the Health Visiting team and the Children's Centre. 11 patients gave their email address to be included in the virtual patient group.



The format of the immunisation clinic is now being reviewed to enhance the experience for mums and babies.

Priority area 3

Description of priority area:

Paying for prescriptions, medical reports, travel vaccinations and private certificates etc.

What actions were taken to address the priority?

Although we have not received any written complaints, there have been many occasions when patients have “grumbled” to the reception or dispensary staff because we only had the facilities to take cash or cheques. This was discussed with the Bank and we have agreed to lease a card reader so that patients can pay by debit card.

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

Following the installation of the card reader and training for staff, patients have been able to pay for prescriptions, travel vaccinations, medicals etc using a debit or credit card.

This new facility has been advertised to patients on our website and on our electronic notice board.

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):

Access – Extended hours this year have included our Nurse Practitioner for the first time and many weeks we offered a third day. For some time we have offered online appointment booking and repeat prescriptions, but also now offer online summary information. The Partners are considering upgrading the telephone system to offer “queuing” information and recording of conversations plus additional lines.

Appointments – The introduction of SMS text reminders has helped with DNAs. Almost 1,000 patients have signed up to receive reminder messages. Demand for appointments continues to increase so we are in the process of making a further change to the number of triage appointments available and increasing the number of appointments available to book online.

Facilities – The planning permission for the new Pharmacy has been approved and building work has now started. There will be minor adjustments to the layout of the waiting room, installation of air conditioning and improved lighting as part of this building programme.

Health Promotion – The electronic notice board and new patient calling system has been installed. We can show a variety of health promotion videos as well as patient information prepared “in-house”. The doctors can also use this TV screen to call patients.

Support for Carers – the Carers register was reviewed. We arranged an open meeting with the Carers Trust, but it was very poorly attended. A registration form for carers was added to our September Newsletter which yielded results. We also prepared a leaflet of useful contacts for carers, which is sent to our “vulnerable” patients and have given copies to the District Nurses. We also now have an email group for carers.



Helping Hand.pdf

4. PPG Sign Off

Report signed off by PPG: YES

Date of sign off: 25th March 2015

How has the practice engaged with the PPG:

Face to face meetings have been poorly attended, but the virtual group has increased in numbers.

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

Mother and baby survey was conducted with a 26% return of questionnaires. Nursing and Residential homes are now included in the virtual group.

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

Complaints and verbal comments are the most common ways of receiving feedback, but other sources are available.

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

Yes at the meeting in November they were discussed and agreed.

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

The electronic information board will be useful for communicating with patients and the facility to pay for items using a debit card is also much more convenient.

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

It is disappointing that patients have not wanted to be more actively involved in the PPG.