Standard Reporting Template

**Devon, Cornwall and Isles of Scilly Area Team**

**2014/15 Patient Participation Enhanced Service – Reporting Template**

Practice Name: Marazion Surgery, Gwallon Lane, Marazion, Cornwall, TR17 0HW

Practice Code: L82047

Signed on behalf of practice: Dr N Walden Date: 06.03.15

Signed on behalf of PPG: Mrs E M Baldwin Date: 13.03.15

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

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| Does the Practice have a PPG? YES | |
| Method of engagement with PPG: Face to face, Email, Other (please specify) Face-to-face meetings, telephone, Email and letter. | |
| Number of members of PPG: 26 | |
| Detail the gender mix of practice population and PPG:   |  |  |  | | --- | --- | --- | | % | Male | Female | | Practice | 48.6 % | 51.4% | | PRG | 30.77 % | 69.23 % | | Detail of age mix of practice population and PPG:   |  |  |  |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | --- | --- | --- | | % | <16 | 17-24 | 25-34 | 35-44 | 45-54 | 55-64 | 65-74 | > 75 | | Practice | 14.4% | 7.2% | 7.8% | 8.9% | 14% | 16.5% | 17.7% | 13.5% | | PRG | 0 % | 0 % | 0 % | 15.38% | 19.23% | 15.38% | 38.46% | 11.54% | |
| 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 | 89.65% | 0.26% | 0% | 8.06% | 0.33% | 0.33% | 0.28% | 0.09% | | 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 | 0.06% | 0% | 0.02% | 0.15% | 0.29% | 0.02% | 0.02% | 0.07% | 0% | 0.37% | | PRG | 0% | 0% | 0% | 0% | 0% | 0% | 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:  The PPG has been advertised on our electronic notice board in the waiting room at the surgery, on the Practice website, NHS Choices website and in the Practice Leaflet since late in 2011. Patients who express an interest are contacted by the PA to the Practice Manager and given further information. New members are always welcomed to the Group.  The group should represent patient points of view, it is important that everyone is represented: including people of different age groups, gender and ethnicity, patients who have been registered here for many years and patients who have been registered here for a few years, patients with learning or physical disabilities and those who rely on a carer to look after them either at home or in a local nursing or residential home.  When the Group was first being set up we looked at the demographics of our patient population; we have a high proportion of elderly patients. A letter was sent to a random selection of patients, male and female in each age group, and to patients of all ethnicities identified. The letter was also sent to patients who had contacted the surgery over the previous twelve months to express concern, make a complaint or to praise services. A letter was sent to over 60 patients, explaining briefly the purpose of the Patient Participation Group and inviting them to express an interest in the group and/or to attend the first meeting. Patients were asked to share the letter of invitation with their friends and family, to further extend the invitation to as many people as possible.  When the PPG was established in early 2012 there were initially eighteen members, twelve female and six male. The lower age groups were not represented. In March 2013 it was noted that there were twenty-three members of the PPG. Over the previous year, one member had left the area and three members had left due to other commitments; nine new members had joined the Group. All patient demographics were represented, as some members had children in the lower age group. In March 2014, there were twenty-four members of the PPG, with one new addition to the group since the previous year. Currently, in March 2015, there are twenty-six members of the PPG, with two new additions to the group since the previous year. This is now a longstanding and committed group.  Patients continue to be invited to join the group. New members are always welcomed. | |
| 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: | |

1. Review of patient feedback

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| Outline the sources of feedback that were reviewed during the year:  Patient satisfaction survey undertaken in February 2014 – reviewed at length with PPG in March 2014 and action points reviewed thereafter.  The Patient’s Association Patient Participation Group Development Project Workshop – attendance by two PPG Representatives in October 2014.  Friends & Family Test – review of feedback from December 2014 onwards. |
| How frequently were these reviewed with the PRG?  These were discussed at length over the last few meetings, as Action Points were discussed and resolved. Friends & Family Test feedback slips will be a regular Agenda item. |

1. Action plan priority areas and implementation

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| Priority area 1 |
| Description of priority area: Internet Appointments. |
| What actions were taken to address the priority?  Appointments could be booked over the internet, via the website. Despite having been identified by previous patient satisfaction surveys as a service that patients would like us to offer, not many patients were making use of this facility. An advertising campaign was to be undertaken and hopefully the benefits of using this system would become more widely known and made use of. |
| Result of actions and impact on patients and carers (including how publicised):  The uptake of appointments booked over the internet via the website has increased. As a result more appointments, with a variety of doctors and at a variety of times have been made available to book in this way. This enables patients to book appointments when the surgery is closed. The staff are actively encouraging patients to sign up for ‘The Waiting Room’ in order to book appointments on-line. |

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| Priority area 2 |
| Description of priority area: The telephone system and opening hours. |
| What actions were taken to address the priority?  The telephone system was reviewed and upgraded. The number of incoming telephone lines was doubled, from four previously to eight.  The opening hours were increased by half an hour in the morning and half an hour in the evening; from 0830-1800hrs previously to 0800-1830hrs. |
| Result of actions and impact on patients and carers (including how publicised):  The Practice was more easily accessible for patients, both in terms of getting through on the telephone and for a longer time each working day. This was publicised in the Practice literature, NHS Choices website, Practice website, by staff and on the noticeboard in the waiting room. |

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| Priority area 3 |
| Description of priority area: It was felt that many of the services offered by the Practice could be more widely advertised. This was despite being in the Practice Leaflet, Dispensary Leaflet, on the Practice Website, NHS Choices website, electronic noticeboard in the waiting area and in some instances on the automated message heard by patients when they were ‘on hold’ on the telephone. |
| What actions were taken to address the priority?  It had been agreed to focus the Agenda around the day to day organisation of the Practice and the services that were offered. PPG members were encouraged to ask questions, on behalf of everyone registered at the Practice, so that a full explanation could be provided.  As a basis for discussion, the group reviewed the Practice Leaflet. Some of the information was familiar to the group due to discussions raised by previous patient surveys. The leaflet was due to be updated and the Practice would appreciate feedback on the content and what other information the PPG thought patients would find helpful. Similarly the Practice wished to review the presentation being shown on the electronic noticeboard in the waiting room.  Copies of the Practice Leaflet (in draft form), Dispensary Leaflet and a printout of the slides of the PowerPoint presentation showing in the waiting room were distributed for review and comment. There was a very illuminating and honest discussion of the services. |
| Result of actions and impact on patients and carers (including how publicised):  The PPG provided valuable feedback on the content and style of patient literature and information. This was in a patient-friendly format that was easy to understand and useful for existing and future 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):

The PPG has discussed a great many issues and has proved to be a critical friend and valuable ‘sounding board’ for new projects such as the Friends and Family Test. They have been very supportive of new ventures in the wider community, such as Living Well. The honest and open discussions have been very helpful in reviewing Practice services and literature. The PPG have also expressed a great interest in commissioning issues, such as the future of Poltair Hospital. The PPG are a committed and supportive group, many of whom have been longstanding members since it began. We look forward to working with our PPG in the future.

1. PPG Sign Off

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| Report signed off by PPG: Mrs E M Baldwin – 13th March 2015  The report will also be reviewed at the next meeting |
| How has the practice engaged with the PPG: The PPG communicates regularly by Email to disseminate information or answer queries. Regular face-to-face meetings are held on a day and time convenient to the PPG. Information about the PPG and copies of Minutes of Meetings are available on the Practice website and on a noticeboard in the reception area.  How has the practice made efforts to engage with seldom heard groups in the practice population? By letter to a random selection of patients and patient groups when the group first began, speaking to parent and toddler groups held nearby, information on our Practice website, NHS Choices website, on the electronic noticeboard in reception, in Practice leaflets; by having a welcoming approach as any patient is welcome to attend a meeting or find out more about the group.  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? The service offer to patients and carers has improved as a result of the action plan. Appointments can be booked outside of surgery opening hours and the uptake of this service is gradually increasing as patients become more aware of it, the telephone system has been updated and telephone access improved, the Practice is open for longer each week day, and information about the services offered is in patient-friendly format. There is a greater understanding of the organisation of the Practice, through open discussion with the PPG and Minutes available to the public.  Do you have any other comments about the PPG or practice in relation to this area of work? We would welcome any patient to attend a future meeting, or if attending in person is difficult to contact the Practice for further information on how they may become involved in a ‘virtual’ (via Email) group. The Kernow Clinical Commissioning Group are also discussing the possibility of a Penwith PPG Umbrella Meeting, where representatives from individual Practice PPG’s can meet and we are encouraging our PPG members to participate in this wider umbrella group. |