

East Anglia Area Team
2014/15 Patient Participation Enhanced Service Reporting Template

Practice Name: QUEEN EDITH MEDICAL PRACTICE

Practice Code: D81066

Signed on behalf of practice: Barbara Green Date: 25th March, 2015

Signed on behalf of PPG: John Abbott 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)	a) Regular meetings of PPG b) Meetings between practice manage, PPG Chair and Newsletter Editor
Number of members of PPG:	19

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	48	52	Practice	19	9	16	15	14	10	8	9
PPG	31	69	PPG	0	0	0	0	16	0	58	26

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	50.9	1.2	-	16.7	-	0.3	0.6	1.8
PPG	89.6			5.2				

	Asian/ Asian British					Black/African/Caribbean/Black British			Other	
	Indian	Pakistan i	Bangladesh i	Chinese	Other Asian	African	Caribbea n	Other Black	Arab	Any Other
Practic e	3.6	0.9	1.0	4.5	6.1	0.5	0.3	0.2	-	11.4
PPG	5.2									

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:

We had a virtual PPG, communicating via email, for several years which did not attract many members, and all were white British, aged over 50. The re-launched PPG included the original members but we also wrote to nearly 150 patients, particularly targeting those in demographic groups that were not represented on the PPG. We had no response at all from anyone below 47 years of age, and no ethnic minorities responded.

We have invitations on posters in our waiting rooms and on our website. We have also advertised the PPG in our practice newsletters.

We have recently recruited one Asian lady as a result of a personal invitation by another member of our group, and are informally seeking to widen our representation.

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? 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:

We identified three main sources of feedback:

- Practice Suggestion book. This is in the porch, so patients are able to write in it without being observed by receptionist or other patients.
- Comments (verbal and written) from patients and relatives to clinical and admin staff.
- Items from PPG members, including their personal observations as well as those from friends and family.

How frequently were these reviewed with the PPG?

Our PPG is currently meeting monthly – this frequency may vary in the future, depending on topics for discussion. We discuss any matters that members or the practice feel necessary, including feedback on services and personnel.

Other feedback since the “new” PCG meetings began has all been favourable, so has not been reviewed as time is tight. We will look more closely at these in future meetings.

3. Action plan priority areas and implementation

Priority area 1

Description of priority area:

Communication – how the practice lets patients know about news and developments, and how we can improve channels for patients to tell us their views.

What actions were taken to address the priority?

We have just launched our Practice/PPG newsletter. We will be sending the newsletter out by email and are busy collecting as many email addresses as possible. We will also post the newsletter on our website and have hard copies in the waiting rooms.

We have also started to allow patients to contact us by email, though this is currently to non-urgent messages and patients are instructed not to use this method if they require an appointment or medical advice.

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

It is early days – the first newsletter has only just been emailed out and we are awaiting feedback. Patients seem keen to supply their email addresses so we are hopeful this will become a popular and useful method of communication. We are conscious that we do not wish to overlook those who do not use the internet, so hard copies will always be available.

Priority area 2

Description of priority area:

A&E attendances – the group has been shocked at the levels of unnecessary A&E attendances. They were largely unaware of the numbers of patients using A&E inappropriately, the cost to the NHS and the impact on local hospital service provision. We agreed it was important to do what we can to try to reduce inappropriate attendances by our patients.

What actions were taken to address the priority?

We have included an article in our newsletter. The surgery has posters on display and there are messages on our website. Members of the PPG are planning to attend our Flu Clinics in the autumn to personally hand out advice sheets on available services and which are the most appropriate to use in different circumstances.

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

We are hopeful that these measures will have a beneficial impact on A&E attendances. Data will be available from the CCG in due course.

Priority area 3

Description of priority area:

Privacy – currently our reception desk is very open and it is sometimes difficult for patients to have private conversations with the staff without being overheard.

What actions were taken to address the priority?

We have put notices up inviting patients to come to the reception office door if they would like private conversation, and we will offer to use a private room when available. We are hoping to build an extension to the practice in the near future and this will be a consideration when designing the reception area. We have also just installed a check-in screen, so patients can book in without giving their names to the receptionist if they prefer.

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

At the time of this report nobody has requested private conversation, and we are waiting for Serco to connect the check-in screen. We are hopeful this will be done in the next week.

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):

We have extended the use of on-line booking and prescription requests. We also now release appointments for on-line booking at 6pm ready for the next day, which means patients do not have to rush in the mornings to beat the crowds.

We have extended the use of telephone consultations, if the patients feel a phone call from one of the doctors would be helpful. This will not prevent patients having appointments, but is an alternative service available if they wish.

We have not been able to provide any additional parking at the surgery, but will bear this in mind should we be successful in our bid to have an extension. We do have cycle racks available for patient use.

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:

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

We continually strive to encourage minority groups to get involved with the practice via the PPG, by advertising on website, posters in surgery, newsletter etc.

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

Suggestion book available in porch, so patients can comment with some privacy. We take part in the Friends & Family Scheme, and invite feedback and comments in the newsletter.

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?

Following presentations at the practice and to the PPG we have "beefed up" our Carers' programme, and are making concerted efforts to identify carers.

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

We have found the PPG extremely helpful in focussing on areas where we can make improvements and monitoring our performance to further enhance our services.

