

# 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

Practice Name: Thorney Medical Practice

Practice Code: D81022

Signed on behalf of practice: *D. Sanders*

Date: 27/3/2015

Signed on behalf of PPG/PRG: *[Signature]*

Date: 27<sup>th</sup> 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)	Face to Face
Number of members of PPG:	7

Detail the gender mix of practice population and PPG:

%	Male	Female
Practice	50%	50%
PPG	43%	57%

Detail of age mix of practice population and PPG:

%	<16	17-24	25-34	35-44	45-54	55-64	65-74	>75
Practice	19%	9%	11%	13%	16%	12%	12%	8%
PPG	0	0	0	14%	14%	29%	29%	14%

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	93%	0.3%	0.04%	2%	0.16%	0.21%	0.12%	0.23%
PPG	100%							

	Asian/ Asian British					Black/African/Caribbean/Black British			Other	
	Indian	Pakistani	Bangladeshi	Chinese	Other Asian	African	Caribbean	Other Black	Arab	Any Other
Practice	0.96%	0.30%	0.01%	0.26%	0.27%	0.26%	0.11%	0.11%	0	0.23%
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:

Articles are placed in the magazines covering the 3 villages in our area which are published on a quarterly basis. These magazines are delivered to every household in the 3 villages. The articles describe the news from the Practice and the PPG and always invite patients to take an interest and come along to meetings. There is a noticeboard in each Surgery with details of the group and the work they do, and again all meetings are advertised on the board together with an invitation to come along.

The group has placed posters on notice boards at local village halls, particularly those where mother and baby groups and playgroups are held, to try and encourage younger patients to attend. We have an extra care facility as part of our Practice area and a member of our PPG is also a member of a relatives group for that facility who can represent the views of that group of patients.

A member of the group has attended community events with a board to try and encourage more patients to join the 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 (Lesbian Gay Bisexual Transgender) community? YES

If you have answered yes, please outline measures taken to include those specific groups and whether those measures were successful:

We have a several small groups of the travelling community who reside in the area, obviously some longer than others. Our Health Visitor has a very good relationship with the more permanent members of this community and often tries to encourage them to come along to represent their group, but as yet with no success.

## 2. Review of patient feedback

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

The results of the national patient survey were reviewed by the group, together with comments left on the NHS Choices website. During the flu campaign the group gave out leaflets to try and encourage patients to leave comments and ratings on the NHS Choices website.

During the meeting in January the results of the Family and Friends test were discussed with the group and any comments that were made as part of those questions.

The CQC “intelligent monitoring” report was also discussed with the group, although the Practice did not agree with the results of this report.

A comments box is located in both surgeries and the comments left in the box were discussed.

How frequently were these reviewed with the PPG?

Meetings are held bi-monthly and one of these topics are usually part of the agenda.

### 3. Action plan priority areas and implementation

#### Priority area 1

Description of priority area:

Privacy of the reception area at the Eye Surgery.

What actions were taken to address the priority?

After a group meeting held at that particular surgery, it was agreed by the group that the only way to create a privacy window (similar to the one at the Thorney surgery) would involve major re-building work and negatively impact on the area of work for the receptionists.

It was agreed that an area to the right of the main reception window (which was already used as a more private area) would continue to be used for patients who wished to speak more privately and better signage would be placed in the Practice to make more patients aware of this facility.

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

Several new (colour) notices have been placed in the surgery and members of the group have trialled the area themselves and are happy with the new arrangements. Patients are now starting to use this area far more than they have before.

Staff will continue to publicise this and direct patients to this area if needed.

### Priority area 2

Description of priority area:

Waiting times on the telephone

What actions were taken to address the priority?

The Practice upgraded the telephone system during the summer of 2014. The telephone system will now advise patients of their place in the queue. The new system also has call reports that are checked on a regular basis and, if needed, extra staff will be deployed to take calls during a particularly busy time of the day. Extra lines will be added if this is not found to be sufficient.

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

This was publicised in the usual Practice articles in the village magazines. Patients seem to be satisfied with the system so far and not many complaints have been received in the Practice of calls not being answered. This will continue to be assessed for its effectiveness and if necessary lines and staff will be changed.

### Priority area 3

Description of priority area:

Better signage of the Practices

It was felt that neither of the Practice had particularly good signage outside the buildings. Thorney has a very small sign (and isn't visible itself from the main road through Thorney) and the sign for Eye is only visible when travelling east through the village, therefore can often be missed by those that don't know the area.

What actions were taken to address the priority?

The local council has previously refused planning permission to place a larger sign at Thorney, although the Practice has had it repainted in recent months (in an effort to make it stand out a bit more)

The Practice is currently investigating ways of improving signage at Eye.

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

No results from this area yet.

### **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):

Privacy at the Eye surgery was an issue from last year. This hasn't been satisfactorily resolved and is one of the priority areas for this year's plan.

Upgrading the phone system has now taken place.

A hand rail has been placed at Eye.

#### 4. PPG Sign Off

Report signed off by PPG: YES

Date of sign off: 25/3/15

How has the practice engaged with the PPG:

By having a doctor and the practice manager as regular representatives at the PPG meetings, which are alternately hosted at each of the two surgeries. Also, the practice provides general office facilities (photo copying etc) to the PPG for free.

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

They have made attempts to contact the local travellers sites to try to engage their views. They also assisted the group in arranging a meeting organised for dementia sufferers and carers last year, with speakers from the Carers Trust and the local Dementia Centre.

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

The decision was made not to complete a patient survey this year, but the practice has advised on different methods of feedback, e.g. National Survey results, Family and Friends Test and suggestions made in the suggestion box in the two surgeries. Following feedback presented by the practice of the comments section made by patients on the NHS Choices website, members of the group attended the flu clinics with leaflets to give out to patients, suggesting that they make more use of these facilities to add their issues and feedback on services.

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

Yes – It was in response to the PPG survey, run and collated by the PPG members, with the assistance of the practice.

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

The privacy window appears to be working well. The telephone system has improved, but at a recent meeting there still appeared to be problems with phones being answered in the early mornings, so we will continue to monitor this. We understand the practice are still looking into the signs at the surgery in Eye.

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

No