

Annex D: Standard Reporting Template

London Region [North Central & East/North West/South London] Area Team
2014/15 Patient Participation Enhanced Service – Reporting Template

Practice Name: **BACON LANE SURGERY**

Practice Code: **E84014**

Signed on behalf of practice: Dr **Laurence Hommel – Senior Partner(signed electronically)** Date: **30/03/2015**

Signed on behalf of PPG: **David Bateman - PPG chairman (signed electronically)** Date: **30/03/2015**

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

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

Method of engagement with PPG: Face to face, Email, Other (please specify) Face to face.

Meeting date for 2014-15 are: 18th June 2014, 3rd September 2014, 15th October 2014, 3rd December 2014, 28th January 2015, 18th of March 2015

PPG meeting dates with the Partners are: 8th April 2014, 2nd September 2014, 21st January 2015

PPG is also virtual group meaning we communicate via email (sending up to date agenda and minutes from each meetings) patients are required to use email and the internet to take part in it. This is simply to allow our PPG to work for those patients who may not be able to attend the face to face meetings.

PPG also communicated any news or minutes in monthly Newsletter, which is available on the practice website as well as in the waiting room for those patients who attend the surgery.

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 practice and current PRG members are using several promotional tools in order to recruit new members from diverse ethnic backgrounds and age groups, which include Practice website, Newsletters, leaflets, designated PPG notice board, and word of mouth. On the practice registration forms patients have option to provide their email address and also if their happy to join the PRG group they can mention it on the registration form and invitations will be sent for the next meeting. Furthermore patients can visit the practice website which includes a dedicated page regarding the PPG membership and meetings. Additionally the patient representative promotes the PRG meetings two/three weeks prior to the meeting on the notice board in the waiting room as well us monthly Newsletter “The Bacon Lane Beacon”. The is also separate section in the Practice booklet promoting PPG

The PPG has been flexible regarding meeting days and times to try to secure new members (young professionals and varied ethnic backgrounds). Throughout the year we have had meetings held in the evening and different days of the week, however it proved successful only in recruiting patient from different ethnic group, but not younger patients.

We are aware that our representation in the older age categories is well above the practice averages however they tend to have more time than younger people to become involved and we do not want to discourage this but merely to encourage those age groups that are not adequately represented and therefore increase the PPG membership as a whole. Over the last few years we have actively increased our male members and will continue to do this. The practice population of Bacon Lane Surgery is predominantly white British. Practice and the PPG committee continue to encourage certain ethnic minority patients to consider PPG if only, to ensure that any cultural differences are considered.

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?

Yes, we do have an above average population of patients over 65 almost 20% of practice population, however as you can see we have engaged very well with this age group.

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

As above

2. Review of patient feedback

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

Practice is currently experiencing some challenges, some of them around the issues:

- **Practice Appointment system**
- **Telephone access and new technology**
- **Concerns about changes to the NHS**

Main sources of the feedback are as follows:

- **2013/2014 Practice Survey results and the resulting 2014/15 action plan**
- **Surgery feedback via patient contact with the surgery (i.e verbal and written complaints- discussed with them anonymously)**
- **CQC Report following visit to the Practice**
- **Friends and Family trial results – reviewed and discussed at the face to face meetings**
- **Reviews and comments on NHS Choices website**
- **“Suggestion Box” in the waiting room area – which encourage patients to leave anonymous feedback and suggestions**

How frequently were these reviewed with the PRG?

- **Monthly PPG meetings between PPG members, Practice Manager and Operations Manager**
- **Quarterly meetings between PPG Chair and two other representatives, Practice Partners, Practice Manager and Operations Manager**

3. Action plan priority areas and implementation

Priority area 1

Description of priority area:

Practice Appointment system (Triage led system)

What actions were taken to address the priority?

- 1. Practice has produced “Our Triage appointment system explained” leaflet to help patients in understanding the mechanism around the current appointment system and to improve their knowledge on using the services. (Leaflet is available in the waiting room area as well as on the practice Website, also our new Practice booklet has a section “Our Triage appointment system explained”)**
- 2. The surgery PPG notice board has a section “Our Triage appointment system explained”**
- 3. The PPG Newsletter has a section “Our Triage appointment system explained”**

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

- Patient now have access to information regarding the Triage appointment system and have better understanding of the ways practice uses to manage the system better.**
- Results of this action are available in the waiting room area as well as on the practice Website, as well as monthly PPG Newsletter.**

Priority area 3

Description of priority area:
Concerns about changes to the NHS

What actions were taken to address the priority?

1. **The formation of a patient led PPG structure replacing the surgery led group.**
2. **The PPG attended a meeting with the local MP to discuss changes for the future including the preservation of primary care.**
3. **The PPG Secretary led a petition and has collected over 100 of signatures supporting “Put Patient First Back General Practice”**

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

- **Patients are aware of NHS discussions around the theme of primary care**
- **PPG has joined and is actively involved with NAPP (National Association of Patient Participation) and a representative goes to AGM**
- **Results of this action are available in the waiting room area as well as on the practice Website, as well as monthly PPG Newsletter.**

Priority area 2

Description of priority area:

Telephone access and new technology

What actions were taken to address the priority?

1. **Practice monitor the performance of the Reception Team and ensure adequate resources are available i.e extra receptionist to answer phone in peak time (8-10am in the morning).**
2. **Practice is also looking to invest in new technology. i.e call monitoring system, automated system and text messaging services**
3. **Practice is already using text messaging services for recall for patients reviews**

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

- **Improved Telephone access**
- **Results of this action are available in the waiting room area as well as on the practice Website, as well as monthly PPG Newsletter.**

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):

- **Patients missing appointments (DNA appointments)** - Practice encourage patient in order to inform surgery as soon as possible when unable to keep an appointment, (Reinforce the message by adding comments on prescriptions, appointment cards, and notice boards in the reception), which continues to work well.
- **Waiting time (CQC highlighted this in their report)** - It has been agreed by the clinicians that if any clinician is running over 30 minutes late – they will individually inform patients via tannoy on 30 minutes intervals. If any patient is not well enough to wait to be seen (due to clinician's delay) reception must inform the doctor/nurse patient with whom the appointment has been booked.
- **Patient education** - Patients continue to be advised on how they can get advice from the local pharmacies for minor elements and how they can use home remedies to help their condition. This will help the practice to reduce the amount of A&E attendance. Introduction of "12 ways to get the best from your GP" in the practice Newsletter. We also have numerous notices in the Practice waiting area and section about Minor Illness in the Practice booklet. Dedicated "Carers Notice board" has been displayed for patients and their carers to ensure they involve in local carers services and to increase awareness of the support groups in Harrow area.
- **Quality of customer Service** – Management has regular staff meetings to advise reception Team on every aspect and to update them on latest changes in the practice. Also customer service staff members are sent for customer care training in order to improve their knowledge to give a better experience to the patient, which continues to work well. They have also participated in "Carers awareness training" and the Practice has nominated carers lead. All suggestions via PPG are taken on board and feedback given by PPG.

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:

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

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

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

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

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

- **The practice has actively encouraged the PPG throughout 2014 & 2015 to take responsibility for their own organisation.**
- **In return PPG have elected Chair and Secretary roles and are actively encouraging patients to become involved.**
- **The practice now has GP partners at quarterly meeting whereby historically at least 2 partners are involved. This does increase GP awareness and input to PPG concerns/ ideas.**
- **The practice actively uses their website to communicate with seldom heard groups and utilises electronic services actively to maximise their involvement within the practice.**
- **The relationship between the practice and the PPG has improved considerably over last few years and the action plan implemented for 2014/15 was very much a jointly owned document and has driven activities through the last 12 months. The actions now in place for 2015/16 are very much PPG led (based on patient requests) and although actively encouraged and agreed by the practice, are being implemented by PPG in the main. Above plans have been put in place in order to improve patient and carers services.**
- **Practice Manager and Operations Manager continue to meet regularly with Chair and Secretary to ensure harmonious working relationship is in place. The practice has actively communicated with PPG, particularly over the difficult times currently being experienced within the NHS, to ensure that PPG are fully aware of problems, and difficulties that are being experienced by the practice. Both parties want, above all else, to ensure that our excellent service to our patients continues.**