

Annex D: Standard Reporting Template

Thames Valley Area Team
2014/15 Patient Participation Enhanced Service – Reporting Template

Practice Name: Oak Tree Health Centre

Practice Code: K84624

Signed on behalf of practice:  (Mark Dalling) Date: 31/03/2015

Signed on behalf of PPG:  (Marion Watson) Date: 31/03/2015

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

Does the Practice have a PPG? Yes Does the Practice have a PRG? Yes
Method of engagement with PPG: <i>Email, face-to-face at meetings and Oak Tree website</i> Method of engagement with PRG: <i>Email and Oak Tree website</i>
Number of members of PPG: <i>6 (as at 06/03/2015)</i> Number of members of PRG: <i>2062 (as at 06/03/2015)</i>

Detail the gender mix of practice population, PPG and PRG:

%	Male	Female
Practice	4611	4804
PPG	3	3
PRG	881	1181

Detail of age mix of practice population, PPG and PRG:

%	<=16	17-24	25-34	35-44	45-54	55-64	65-74	>= 75
Practice	2564	610	1635	1897	1317	726	428	238
PPG	0	0	1	1	2	1	1	0
PRG	185	111	579	566	311	187	93	30

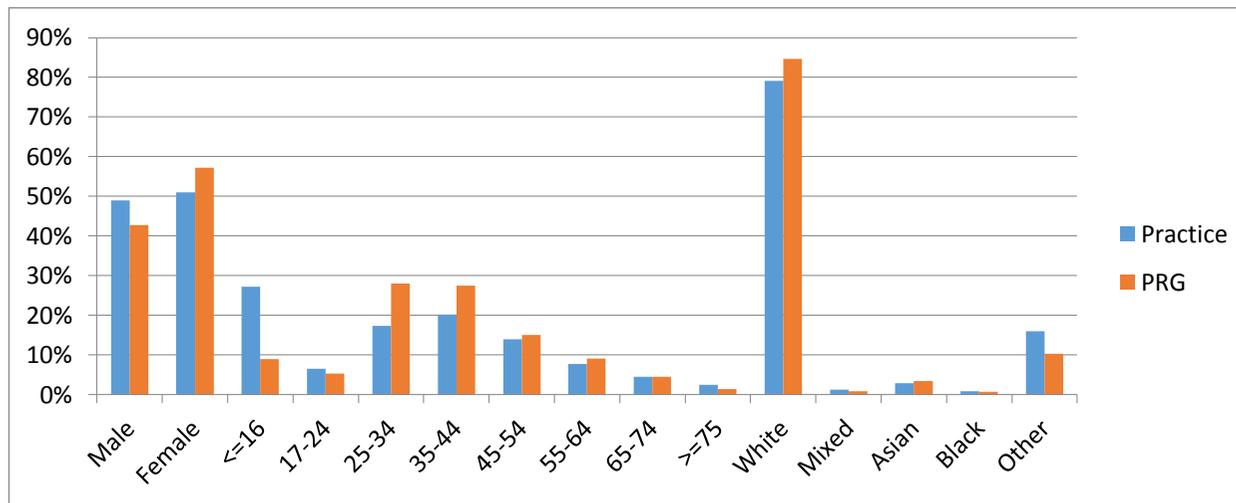
Detail the ethnic background of your practice population, PPG and PRG:

	White				Mixed/ multiple ethnic groups			
	British	Irish	Gypsy or Irish traveller	Other white	White &black Caribbean	White &black African	White &Asian	Other mixed
Practice	6795	41	0	617	34	35	34	16
PPG	5	0	0	1	0	0	0	0
PRG	1589	16	0	140	3	11	1	4

	Asian/Asian British					Black/African/Caribbean/Black British			Other	
	Indian	Pakistani	Bangladeshi	Chinese	Other Asian	African	Caribbean	Other Black	Arab	Any other/ undeclared
Practice	135	34	6	48	43	64	9	3	8	1493
PPG	0	0	0	0	0	0	0	0	0	0
PRG	32	10	3	15	10	15	0	1	2	210

Describe steps taken to ensure that the PPG/PRG is representative of the practice population in terms of gender, age and ethnic background and other members of the practice population:

The core PPG has discussed the difficulty in ensuring representation within the PPG since it is such a small group; it was agreed that emphasis should therefore be upon ensuring that the wider PRG was representative, and hence over the last year steps have been taken to significantly increase the numbers in the PRG and to ensure that these numbers were then representative of the whole Practice population. We have over the last year successfully increased the numbers within the PRG by some 55%, to a figure of 2062 at 06/03/2014, and which is very representative of the whole population, as shown in the following chart:



We are very pleased with this level and distribution of 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 community? *No*

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

1. Review of patient feedback

Outline the sources of feedback that were reviewed during the year: *Friends and Family (we were operating this informally at the end of 2014 and collating information well before the official reporting requirements), direct patient feedback and complaints, PPG member feedback.*

How frequently were these reviewed with the PPG? *Regular updates via email and scheduled meetings.*

2. Action plan priority areas and implementation

Priority area 1

Description of priority area: *Capacity & Continuity – the need to increase GP and Practice Nurse resource to better serve the needs of our patients.*

What actions were taken to address the priority? *Two new Practice Nurses were recruited in 2014/15, one replacing a leaver but one additional. A new salaried GP was recruited in to the Practice on an 8 session/week basis in January 2015, and a new GP Partner is joining the Practice on a 6 session/week basis in April 2015.*

Result of actions and impact on patients and carers (including how publicised): *The new Practice Nurses have allowed significant advances in availability of appointments and in the management of long term conditions. The new GPs are having significant impact in improving the response times we have to patient demand and in ensuring the best possible levels of continuity of care. The employment of the new Practice Nurses and GPs has been prominently displayed in the Practice and on the Practice's website.*

Priority area 2

Description of priority area: *Pre-bookable appointments – improving ease of access.*

What actions were taken to address the priority? *A system for making a proportion of Health Care Assistant (HCA) appointments available for online booking has been implemented in 2014/15, and deployed in February/March 2015. Information has been made available in the Practice, and information is in the process of being uploaded to the Practice's website.*

Result of actions and impact on patients and carers (including how publicised): *Improved ease of access to HCA appointments; range and number of appointment types will be developed further in the near future. Communicated in Practice and via website.*

Priority area 3

Description of priority area: *Patient Engagement – further discussion within the PPG as to how greater engagement and representation could be achieved.*

What actions were taken to address the priority? *Targeted action to obtain patients' email addresses at registration and to obtain consent to be contacted as a member of the PRG. Detailed analysis of the increasing PRG membership in order to address any limitations in representation.*

Result of actions and impact on patients and carers (including how publicised): *Better represented PRG now available; communication of relevant locality and Practice information now possible via direct emailing of the PRG membership.*

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 continued to engage as fully as possible with the small core group of PPG members. We have discussed ways of improving engagement in the wider PRG, which have been successful, and have also discussed ways in which we may be able to increase the numbers of the core PPG e.g. by offering daytime meetings in addition to our current offering of evening meetings. Our priority form previous years has been to raise engagement / representation in the PRG, to better resource the Practice to improve our levels of service, and to communicate effectively. An outstanding action for us is to have a PPG Chair in place.

3. PPG Sign Off

Report signed off by PPG: Yes

Date of sign off: 31/03/2015

Has the practice engaged with the PPG?

I would say, quite well. Regular quarterly meetings, at a sensible time for most. Additional information e-mailed on frequent occasions. Should anything desperately urgent crop up, I feel confident that I would be appropriately informed immediately.

I consider that I have been kept well informed and kept up to date with current issues, whilst not taking an active role.

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

I don't feel able to give an informed response to this. I am sure, however, that should the need arrive to contact a specific sector/group of patients, ways would be found to make the appropriate contact.

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

My answer to question above would be the same for this one.

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

Yes, I believe our opinions were sought and, in most instances, incorporated into the action plan.

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

Consultations with GPs or nursing staff on same day as initial call, quicker entry into on-going treatment areas, a much improved

“feel” about the place. It’s not everybody’s “cup of tea” but it is efficient and it does work!

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

Not much to add really. It’s good to feel that I am making (albeit a small) contribution to maintaining the NHS in the guise which the vast majority of the country wants it to remain, and not in the vested interests of those few with cash wanting to make more at our expense.

As a patient, I continue to find the Oak Tree Health Centre extremely accommodating and supportive.