

Annex C: Standard Reporting Template

Leicestershire and Lincolnshire Area Team
2014/15 Patient Participation Enhanced Service – Reporting Template

Practice Name: Marsh Medical Practice

Practice Code: C83042

Signed on behalf of practice: Lorraine Green – Practice Manager

Date: 16.3.15

Signed on behalf of PPG: Terry Clayton - PPG

Date: 16.3.15

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

Does the Practice have a PPG? [Yes and virtual members](#)

Method of engagement with PPG: Face to face, Email, Other (please specify)
[We have a face to face meeting 4 times per year, contact via email and have virtual members.](#)

Number of members of PPG: [14 PPG patient members, 5 PPG staff members.](#)

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		50.05	49.95	Practice	866	414	534	506	869	915	1044	688	
PPG	36	64		PPG	0	0	0	1	3	5	4	1	
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	5919	2	9	3	2								
PPG	13												
				Asian/Asian British									
Indian Pakistani	Bangladeshi	Chinese		Black/African/Caribbean/Black British	Other								
Asian African Caribbean	Other Black	Arab	Any other										
Practice	3	3	2	1		16							
PPG	1												

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 Marsh Medical Practice, Patient Participation Group is now in its third year and has gone from strength to strength now having 14 patient members and 5 practice staff members. We have a good mix of age and gender covering both geographical areas, North Somercotes and Manby. The group are mainly white British but this is consistent with the practice population. Throughout the years the practice has used various methods to engage with all patients ensuring all are given the opportunity to join the groups. There are posters around the building; new patient registration forms include information about joining the PPG, practice website and a clear offer on a notice board for patients to join the group. We have also used the opportunity to advertise for new members at the practice drop in flu clinics which are held in the local village halls. For the last two years the PPG members have raised the profile of the group by helping out at the flu clinics, baking cakes and serving tea and coffee, proceeds going to local charities.

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/NO

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:

The main source of feedback for this year was the 2014 GP patient survey. Lorraine Green, Practice Manager looked at the results of the survey and put them to the group in the form of a Power Point presentation.

Suggestion boxes are in place at both sites Manby and North Somercotes, these boxes allow patients to give both anonymous and named suggestions to the practice.

Suggestions from PPG members.

Suggestions via virtual PPG members.

Email to and from PPG member.

Interaction between staff and non PPG members.

Interaction between patients, families, carers and the practice team with the PPG at the drop in flu clinics. The PPG members actively encouraged the PPG while serving tea, coffee and cakes to the patients attending for their flu vaccination.

Interaction at front of house between Practice Manger and patients attending the surgery.

How frequently were these reviewed with the PRG?

The PPG meets face to face 4 times per year, the minutes of the meetings are displayed on the website.

3.Action plan priority areas and implementation

Priority area 1

Description of priority area:

Following the publication of the GP patient survey it was observed by the group that there are issues around waiting times to see a clinician at the surgery. The survey showed that 44% of patients waited from 5 minutes to 15 minutes and 39% of patients waited more than 15 minutes to see a clinician. The group had asked previously, that the practice receptionists inform the waiting room patients of any waiting time. It was first suggested that the practice use white boards in the waiting room, to give up to date information to the waiting patients in respect of how long that they would have to wait to see the doctor or nurse. It was decided that there might be difficulties with this especially ensuring that it was accurate at all times.

How long do you normally have to wait to see a clinician after your appointment time?

I don't normally have an appointment at a particular time	0
I wait less than 5 minutes	0
I wait from 5 minutes to 15 minutes	44%
I wait more than 15 minutes	39%
I cannot remember how long I wait	10%

What actions were taken to address the priority?

The practice does operate a policy of 'one ten minute appointment, one problem'. It was agreed to continue advertising to patients with regards to 'one ten minute appointment, one problem'. Staff to discuss with patients, when they make any appointment, the practice protocol of 'one ten minute appointment, one problem'.

Introduction of Jayex system linked to television in waiting room. This equipment will enable the staff to give up to date information in respect of waiting times, emergency call outs and ensure patients are aware of the policy 'one ten minute appointment, one problem'.

Priority area 2

Description of priority area:

Following PPG discussion and the results of the 2014 GP survey it was decided that patients need to be better informed of the ways that they can book appointments. The results of the survey indicated that 91% of patients normally booked an appointment to see a doctor or nurse by telephone. It was felt that most of these telephone calls were made to the surgery at around 8.00 am as feedback from the group indicated a backlog of calls around 8.00 am. One member of the group discussed the fact that he had tried possibly 40 times to get through to the surgery by telephone at 8.00 am one morning.

Patients normally book appointment either in person or by telephone to see a GP or nurse.

How do you normally book appointments to see GP or nurse?

In person	20%
By telephone	91%
By fax	0
On line	0
Doesn't apply	0

What actions were taken to address the priority?

It was agreed that patients should be better informed by the practice of the alternative ways of booking an appointment. The most recent addition to this being the on line booking service whereby patients can book both face to face and telephone appointments on line.

The new telephone system installed in February 2015 will help with the back log of calls and waiting times for calls to be answered. The new telephone system enables additional staff to answer the phone at busier times. With a press of one button on the handset up to eight staff members can answer calls at the same time. The new system will also enable fewer staff to take telephone calls at the less busy times. The system has taken away the automated attendant (press button options) to give patients easier access to reception.

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

The fact that patients can book on line, access their medical records and order repeat medication on line has been advertised by a poster campaign. Patients are now booking both face to face and telephone appointments on line. The impact of discussion with the PPG in respect of on line booking has been great and patients are utilising the on line booking facility fully.

Front line staffs are more proactive at offering the online passwords to patients, encouraging them to access the online appointment booking service.

New patients registering with the practice are given details of the practice on line services, this will include details of how to obtain their password from the receptionist and link to the web address.

Priority area 3

Description of priority area:

It was discussed at the PPG meetings and highlighted in the 2014 GP survey the fact that patients would prefer appointments before 8.00 am, after 6.30 pm and on a Saturday. The 2014 GP survey indicated that 35% of patients would prefer an appointment with the surgery before 8.00 am, 72% after 6.30 pm and 72% on a Saturday.

The winter pressures plan to open the surgery on Saturdays during the winter months was discussed with the group; all agreed that opening on a Saturday during the winter months would considerably improve access to the surgery.

During previous PPG meetings the feedback from some members of the group had been that patients living in the Manby area have not been given the same access to a doctor or nurse as the North Somercotes area patients, due to the fact that Manby surgery closes on a Tuesday and a Thursday afternoon. The surgery at Manby on a Friday afternoon does not offer access to a doctor or nurse.

Discussion with the group raised the possibility of extended hours to offer appointment slots during the hours that currently we do not, before 8.00 am and after 6.30 pm.

Question in respect of additional opening times.

Patients were asked what additional times would make it easier for them to see or speak to someone at the surgery.

Before 8.00 am	35%
At lunchtime	0
After 6.30 pm	72%
On a Saturday	72%

What actions were taken to address the priority?

It was agreed that the winter pressures enhanced service, Saturday appointments would greatly help patients access the surgery at a particularly busy time of the year. Saturday opening will be operational from February 2015 to until 4th April 2015. Later appointment slots for working patients have been introduced giving patients the choice of appointments up until 6.00 pm. The possibility of plans for extended hours are now being discussed with the doctors at the practice, these may feature early mornings and late evening appointments. The new doctor now has a full afternoon of appointments at Manby on a Friday afternoon.

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

Excellent uptake of appointments for both doctor and nurse for the Saturdays worked as part of the winter pressures plan. The team will see well in excess of fifty patients between the hours of 8.00 am and 4.00 pm on a Saturday. The Saturday openings were advertised by a poster campaign and word of mouth by the PPG members. Later afternoon appointments are now being offered to working patients, these are advertised to patients by poster campaigns in the waiting rooms. Staff members will promote the Friday afternoon availability face to face and over the telephone.

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):

Actions from previous years that were identified and agreed with the Patient Participation Group have all been completed and reviewed.

New telephone system - Now installed, there was a delay in the installation but this was out of the hands of the practice as BT had ordered the wrong telephone handsets. The system infrastructure also needed updating which took some weeks, again a problem with BT.

Advertising of repeat medications - Advertising is now in place.

Dosette boxes – Patient aware of the practice protocol for criteria and issue of dosette boxes.

Infection control measures – Infection control laminated posters now give clear understanding why the surgery no longer has toys or magazines in the waiting room.

Discussion with doctors in respect of practice extended hours – Discussion is still on-going between the doctors at the practice although we did discuss with the PPG members at the January 2015 meeting the fact that the surgery was considering opening on Saturdays for the winter pressures plan. The Saturdays will run from 7.2.15 until 4.4.15. Since the January meeting the practice has also added an extra Friday afternoon clinic at the Manby surgery.

Waiting room clocks – Now in place.

Waiting room waste bins- Now in place.

White boards for indicating waiting times – No longer needed as Jayex screens are due to be installed April 2015.

Notice board TV- No longer needed as Jayex will give the facility to provide information to waiting room patients.

Waiting room close to reception – Confidentiality issues have been resolved with staff training and music provided by the Jayex screens.

Additional confidentiality training for staff – On-going training.

Laminated posters indicating one ten minute appointment, one problem are now in place.

4.PPG Sign Off

Report signed off by PPG: YES

Date of sign off: 18.3.15

Has the report been published on the practice website? NO- Will be published by 31.3.15

How has the practice engaged with the PPG:

The practice has an established very successful PPG group which meets face to face 4 times per year. We also have a growing group of virtual members who will contribute to the development of the services that we provide.

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

The practice and PPG members make every effort to liaise with a whole range of patients. For the last two years the practice and PPG members have promoted the PPG at the flu drop in clinics so that seldom heard groups such as carers are made aware of the group and the work that they do.

The Practice Manager has been interactive with the local psychiatric care home.

One of the PPG members is involved with Meals on Wheels for the local villages and promotes the PPG.

The Practice Manager has face to face and telephone discussions with patients both in the surgery and out in the community.

New patient registration forms promote the work of the PPG.

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

The practice receives feedback from a variety of sources throughout the year:-

Questionnaires from the over 75 patients, their family and carers (also available on Survey Monkey)

Suggestion boxes in the waiting rooms.

Feedback following flu drop in clinics in the local village halls. The practice team and PPG members encourage patients to chat about the services we provide.

Patients actively talk to the Practice Manager in the waiting room and in the community demonstrating an open culture and to encourage discussion.

All staff are proactive in promoting the services we provide and taking feedback from patients.

Friends and family test (also available on Survey Monkey)

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

The PPG was involved in the agreement of priority areas and the resulting plan. As already noted the priorities were agreed

Please return this completed report template to the generic email box – england.leiclincsmedical@nhs.net no later than 31st March 2015. No payments will be made to a practice under the terms of this ES if the report is not submitted by 31st March 2015.