

West Yorkshire Area Team
2014/15 Patient Participation Enhanced Service – Reporting Template

Practice Name: Garden Surgery

Practice Code: B86054

Signed on behalf of practice: Sarah Cave, Practice Manager

Date: 30 March 2015

Signed on behalf of PPG: Virtual Reference Group

Date: 30 March 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: Reports via royal mail and some E mail, follow-up by telephone											
Number of members of PPG: 20											
Detail the gender mix of practice population and PPG:				Detail of age mix of practice population and PPG:							
%	Male	Female									
Practice	49.2	50.8	%	<16	17-24	25-34	35-44	45-54	55-64	65-74	> 75
PRG	55.0	45.0	Practice	23.6	10.5	13.4	13.1	13.7	11.5	7.1	8.0
			PRG	0.0	0.0	0.0	20.0	15.0	35.0	25.0	5.0

Detail the ethnic background of your practice population and PRG:

The figures for practice population represent the percentage of recorded ethnicity. Ethnicity is only recorded in 16.57% of the practice population so the figures below do not provide accurate comparison.

	White				Mixed/ multiple ethnic groups			
%	British	Irish	Gypsy or Irish traveller	Other white	White &black Caribbean	White &black African	White &Asian	Other mixed
Practice	65.46	0.52	0.00	6.29	4.85	3.20	0.72	0.41
PRG	85.00							

	Asian/Asian British					Black/African/Caribbean/Black British			Other	
%	Indian	Pakistani	Bangladeshi	Chinese	Other Asian	African	Caribbean	Other Black	Arab	Any other
Practice	2.78	1.44	0.31	0.31	1.65	10.21	0.52	1.24	0.00	0.10
PRG	5.00								5.00	5.00

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 approached a cross section of our patient demography using best endeavours to ensure that the Patient Reference Group is representative. Despite continued recruitment we been unable to more female members to the PRG. The PRG came about following the introduction of the requirement by the Department of Health although it had existed on a smaller and more informal scale previously. All members of our PRG are coded as being "Patient participation Group Member." As per last year, we have continued to enter a code which shows they have ongoing "Participation".

Engaging our Practice population by setting up a PRG allows us to gain feedback from a wider group of our Practice population. Members of the Patient Reference Group continue to be recruited by a combination of means. Some came forward as a result of advertising for members on letter heads, patient check in screen and posters. Some are asked to contribute to this forum having had negative experiences and others are approached by having being identified as users of different services. The practice continues to recruit new members and was successful in signing up six patients to the PRG during this year but unfortunately two patients left the PRG.

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:

2. Review of patient feedback

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

In previous years it was a mandatory requirement of the Patient and Participation Enhanced Service (PPES) to ask the Patient Reference Group what areas of the practice we should focus on but this was dropped from the PPES this year. Instead practices were given the option of using nationally available survey results, the results of the new Friends and Family Test, and themes of comments and complaints made by our patients. The development of a bespoke questionnaire usually produced questions that are similar to the national patient survey but the bespoke questions in our surveys do not produce results that can be compared against other practices in our locality; this information can be very valuable in terms of helping us in terms of where we need to make improvements.

We have therefore decided to use the results of the national patient survey this year as a basis for gauging the opinion of our patients along with the results of the first few months Friends and Family test.

We produced an extract of the most recent quarters' results and shared this with members of the PRG and sought feedback from them in terms of what actions we should take as a result.

The GP Patient Survey is an independent survey run by Ipsos MORI on behalf of NHS England. The survey is sent out to over a million people across the UK each year. Questionnaires are distributed at random to patients who have been registered with a GP practice during the last six months. Patients can either complete the paper survey they receive or respond via an electronic version of the questionnaire using the unique code they are provided with. Patients who speak other languages or use British Sign Language can also complete the questionnaire by special arrangement

How frequently were these reviewed with the PRG? Annually

3. Action plan priority areas and implementation

Priority area 1
<p>Description of priority area:</p> <p>Review situation behind 'Waiting times after arriving for an appointment'</p>
<p>What actions were taken to address the priority?</p> <p>This area was reviewed during 2014/15 after it was flagged up by the Patient reference group last year. Details of last year's findings are set out later in this report but we have agreed to retain this on the 2015/16 action plan and will report back in due course.</p>
<p>Result of actions and impact on patients and carers (including how publicised):</p> <p>We have drafted a leaflet for patients 'Getting the most out of the practice' which is designed to provide patients with information that will help us to help them in making sure they get the most out of the practice. It includes information relating 'self-help' for common/self-limiting illnesses, using pharmacists as a first point of call and keeping appointments/cancelling them when not needed. We will share this leaflet with our PRG in the first quarter of 2015/16 for review and sign off.</p>

Priority area 2

Description of priority area:

Promoting the benefits of the triage system to our patients

What actions were taken to address the priority?

Feedback from many patients provides us with evidence that our triage system is 'valued'. However, some patients do not seem to share the opinion that the triage system provides the practice with a mechanism to respond to patient demand pro-actively.

Our PRG have asked us to review this part of the practice appointment system with a view to improving 'perception' of what the triage system offers and establish how we can promote this service better.

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

We have initiated a review of the triage system for 2015/16 as part of a wider 'service promotions' campaign. This includes re-developing our Patient Reference Group from that of a virtual group in to an actual group that meets face-to-face. We will feedback our initial findings to the PRG during the first quarter of 2015/16.

Priority area 3

Description of priority area:

Access to Doctors and Nurses at the practice

What actions were taken to address the priority?

The results of the national patient survey indicate we do not provide adequate access to patients for doctor and nurse appointments, despite having a triage system in place. Feedback obtained from the Friends and Family test for December, January and February also indicates the same as well as many of the written complaints we receive. However, some patients also tell us we offer better access to services than some surgeries they have previously registered with.

The patient reference group have therefore asked us to consider how we might address this issue over the next 12 months. We have set this as a priority area and will include this in our actions for the coming year.

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

This area was reviewed during 2014/15 after it was flagged up by the Patient reference group last year. Details of last year's findings are set out later in this report but we have agreed to retain this on the 2015/16 action plan and will report back in due course.

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):

Summary of proposals from last year

Our action plan focused on the three priority areas which had been agreed with our PRG, these were; Getting an appointment and waiting in reception, Car parking facilities and Friends and Family test pilot.

Getting an appointment

We received lots of feedback and comments from patients relating to getting an appointment to see a doctor at the practice. Some of the feedback we received from patients indicated they had to wait a long time before seeing their 'preferred GP', other patients felt that once they had an appointment that the waiting times in surgery were unnecessarily long. Other feedback we received said we didn't provide a wide enough range of times to suit their needs around work commitments and other patients felt we should offer a walk in service.

This feedback alone demonstrates that we have a tough task in hand to provide a service that will meet everyone's expectations but more appropriately their needs. As a provider within the NHS we receive a limited amount of money from the NHS to deliver a service that meets the needs of the population and provides as sufficiently a wide ranging service. This allocation of money can only provide as much as we are currently offering and doesn't offer any room for additional cover or sessions.

As a patient, you can influence this in a number of ways;

- When you're ill, consider using self-care in the first instance; having your own 'medicine cabinets' at home with things like, Paracetamol, Brufen, Anti-inflammatory creams, and anti-histamines can usually provide a 'first port of call' for many self-limiting illnesses.
- If you don't think this approach will help or you're unsure, a trip to the chemist can usually provide a solution to many sort term illnesses such as minor aches and pains that have suddenly come on, coughs and colds. You don't need an appointment to see a chemist and they receive many years of training to deal with common ailments such as these.
- The majority of our patients are able to keep their appointments but some book appointments and then don't keep them. Some of these patients forget they had an appointment and others 'get better' and don't bother coming to the surgery but don't remember to cancel them. This contributes to a reduction in our capacity – appointments are a valuable commodity so if you have an appointment that you cannot keep, please contact us to cancel it.
- Providing us with an up to date mobile telephone number ensures we're sending you appointment reminders to the correct number – this again will help to remind patients that they have an appointment that they need to keep.
- Some patients need longer than our usual 10 minute appointment slot; it's helpful if those patients who need more than 10 minutes advise our receptionist so that we can book an appointment with enough time, this will help to reduce waiting times for other patients.
- Preparing for your appointment can also help us to keep to appointment times; if you've thought about what you want to ask the nurse or doctor, or have kept information relating to your illness this can usually make best use of the time you have. If you need an interpreter, it's useful to make

arrangements to have someone with you who can interpret for you or let us know in advance so that we can make arrangements with 'Language line' in advance.

- Plan ahead – if you need a 'Fit note' (previously known as 'Sick notes') please remember to book your appointment for when this needs to be renewed and not the day before it needs renewing. Similarly, if you need repeat medication, request this in advance via reception instead of booking an appointment on the day it's needed – this is wasteful of an appointment when we have processes to issue this without needing to see a doctor.

Car Parking Facilities

Feedback from our last survey highlighted that over two thirds of patients get to the surgery using a private or public vehicle. We were surprised by this given that nearly half of these patients lived within a mile and three quarters lived within two miles.

The car park is provided for both staff and patients who use the building which covers two different practices and some community based services. Many of the staff who work in the building travel from further afield each day and therefore drive and park at the building. We have publicised in our patient leaflet that we have a bicycle park and encourage all patients to walk to the surgery. We've also published information in our practice leaflet and on our website about the public transport links near to the surgery.

Friends and Family test pilot

When we ran the friends and family test pilot last year we we're very pleased with the results (73% of patients were Likely or Extremely likely to recommend us to their friends of family) and constructive comments that patients were making.

In December, it became a contractual obligation for us to continually run the 'Friends and Family Test' so we've been gathering this feedback since. We have provided the first few months results of this later in the report.

Action Plan Update

During the last year we have worked hard to improve things across the areas we proposed following our last survey and at the same time continue to provide our patients with the best quality services. Some of the areas have been easier to respond to than others and we continue working on some areas because of their complexity – rest assured we are still committed to these areas and will continue to involve and inform you as a member of the PRG.

Getting an appointment

Proposal:

1. Review of how we currently deliver our service in terms of GP appointments, Nurse and Health care assistant appointments and consider what improvements can be made taking the above patient comments in to account.
2. Carry out more detailed investigations in to surgery waiting times and review how these can be reduced.

What we've done since last year:

1. We have reviewed our service model and have concluded that we provide a sufficiently wide range of appointments using a mixture of healthcare professionals and times to suit the majority of patients;
2. We have started to put together a 'Self-help' guide for our patients to support them in getting the best out of our appointment system – we are aiming to make this guide available during the next few months.
3. We have reviewed our waiting times in surgery and considered how these might be reduced further. Our clinical team are more aware of the variation in the waiting times we have and aim to keep appointments to time where possible. However, where patients need more than their planned 10 minute appointment slot, we will 'run over' for clinical reasons i.e. when it's inappropriate to bring a patient back at a later date. We're including a section in our 'Self-Help' guide which will help patients to book more appropriate lengths of appointments.

Car Parking

Proposal:

1. Publicise more clearly that the surgery has a bike park.
2. Encourage patients to walk to the surgery especially those that live within a one mile radius.
3. Include a 'Getting to the surgery' section in our practice leaflet and on our website which includes full details of all available bus connections and public transport options.
4. Work with other users of building to review how car parking capacity can be maximised.

What we've done so far:

1. We have updated our practice leaflet to include details about the bicycle park, and the bus connections/transport options near the surgery;
2. We ran a campaign earlier in the year to encourage patients to walk to surgery. This included posters on our notice boards and messages on the right hand side of prescriptions;
3. We were unfortunately unable to set anything in place with other building users in terms of maximising car parking capacity due to workload capacity.

Friends and Family Test Pilot

Proposal:

1. Routinely run the Friends and Family test from April as per contractual requirements.
2. Review issues around waiting times as suggested by patient comments and as per commitments made in previous section of the report.
3. Look at how prescription requesting service can be improved.

What we've done so far:

1. We started running the Friends and Family test from December when it became a contractual requirement. Results for the first few months are detailed later in the report.
2. See information relating to waiting times in the 'Getting an appointment' section
3. We reviewed our prescription requesting service and made some changes to improve turn-around-times.

4. PPG Sign Off

Report signed off by PPG: YES

Date of sign off: 30 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?

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 PPG have been consulted on in setting the priority areas and will be encouraged to emerge as an 'actual' patient reference group during 2015/16. In previous years, the PPG have been engaged with the practice as a 'Virtual' group through written and telephone based communication.

The Practice continues to engage with a wide range of patients through reviewing the results of the national patient survey, assessing themes being flagged up by the Friends and Family test and identifying the 'issues' being raised in both written and verbal complaints from patients.

The practice continues to take the feedback we receive in to account and responds to address issues where changes are necessary.