

Annex D: Standard Reporting Template

Shropshire and Staffordshire Area Team
2014/15 Patient Participation Enhanced Service – Reporting Template

Practice Name: Bridgnorth Medical Practice

Practice Code: M82004

Signed on behalf of practice: Sandra Sutton, Practice Manager

Date: 23 March 2015

Signed on behalf of PPG: Mike Teague (Chair)

Date: 23 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: Face to face, Email, Other (please specify) Face to Face, telephone and email																																					
Number of members of PPG: 15																																					
<p>Detail the gender mix of practice population and PPG:</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 20%;">%</th> <th style="width: 30%;">Male</th> <th style="width: 30%;">Female</th> </tr> </thead> <tbody> <tr> <td>Practice</td> <td>49.7</td> <td>50.3</td> </tr> <tr> <td>PRG</td> <td>50</td> <td>50</td> </tr> </tbody> </table>	%	Male	Female	Practice	49.7	50.3	PRG	50	50	<p>Detail of age mix of practice population and PPG:</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 10%;">%</th> <th style="width: 10%;"><16</th> <th style="width: 10%;">17-24</th> <th style="width: 10%;">25-34</th> <th style="width: 10%;">35-44</th> <th style="width: 10%;">45-54</th> <th style="width: 10%;">55-64</th> <th style="width: 10%;">65-74</th> <th style="width: 10%;">> 75</th> </tr> </thead> <tbody> <tr> <td>Practice</td> <td>16.8</td> <td>7.5</td> <td>9.7</td> <td>12.5</td> <td>15.0</td> <td>14.5</td> <td>14.1</td> <td>9.9</td> </tr> <tr> <td>PRG</td> <td>0.0</td> <td>0.0</td> <td>0.0</td> <td>6.6</td> <td>20</td> <td>26.7</td> <td>6.7</td> <td>40</td> </tr> </tbody> </table>	%	<16	17-24	25-34	35-44	45-54	55-64	65-74	> 75	Practice	16.8	7.5	9.7	12.5	15.0	14.5	14.1	9.9	PRG	0.0	0.0	0.0	6.6	20	26.7	6.7	40
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Detail the ethnic background of your practice population 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				98				0
PRG	100	0	0	0	0	0	0	0

	Asian/Asian British					Black/African/Caribbean/Black British			Other	
	Indian	Pakistani	Bangladeshi	Chinese	Other Asian	African	Caribbean	Other Black	Arab	Any other
Practice								2.0	0	0
PRG	0	0	0	0	0	0	0	0	0	0

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:

A total of 2.0% of the practice population is from an ethnic minority group, with 98% from white groups. The gender split is even. The PPG and Practice are attempting to build up a ‘virtual’ group which will hopefully increase the numbers of younger members and attract those from the ethnic minority 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 community? YES

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

Large number of nursing homes/residential homes and retirement housing

Large number of frail/elderly patients

2. Review of patient feedback

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

PPG Survey

CQC Inspection – feedback from the inspectors and patients

Open Day – feedback from patients and organisations attending the event

Patient concerns section on PPG meeting agenda

Attendance of PPG members at County wide PPG meetings

How frequently were these reviewed with the PRG? At six weekly PPG meetings and with the intermittent separate PPG sub-committee

3. Action plan priority areas and implementation

Priority area 1
<p>Description of priority area: To improve electronic access to services</p>
<p>What actions were taken to address the priority?</p> <p>The PPG sub-committee and Practice representatives met on 26 January agreed to conduct a survey of patients to assess the current level of access to services using electronic methods. The questions were agreed then submitted to a full PPG meeting for agreement.</p> <p>It was also agreed that on the next open day, scheduled for October 2015, a member of the PPG would provide demonstrations of how to use the electronic access systems. Shropshire Council will also be invited to the open day to set up a display of telecare services</p>
<p>Result of actions and impact on patients and carers (including how publicised):</p> <p>The survey was delayed due to a combination of a change of Practice Manager and the need to focus on evaluating general organisational issues prior to our CQC Inspection and an imminent change of clinical system.</p> <p>The survey was conducted in the week commencing 16 February and evaluated by the PPG sub-committee and Practice on 13 March. The results will be fed back to the wider PPG at the meeting on 23 March.</p> <p>103 patients took part in the survey and only 31.4% of these patients had registered for on-line services. However, only 14.6% of the total number surveyed order prescriptions, and 7.8% book appointments using the on-line system.</p> <p>The Practice and PPG will now work together to promote the use of the on-line services and the fact that it removes the need to attempt to either make contact by telephone or attending the surgery to order prescriptions or book appointments. Only 29 of the 103 patients surveyed were aware that they would be able to access their medical records by 31 March, so more publicity will be arranged. The findings will be published on the Practice website by 31 March. However, due to the need to focus on the change of clinical system there will be no posters put up until later in year, when the PPG and Practice will actively promote the use of on-line services</p>

Priority area 2

Description of priority area: To increase PPG membership and demographic representation by setting up a 'Virtual Group' who could contribute to future surveys and email correspondence with the PPG and Practice

What actions were taken to address the priority?

Patients taking part in the survey undertaken for Priority One were asked if they would be prepared to assist in future surveys and correspondence and a list of 49 email addresses taken. The PPG will email these patients to confirm that the addresses are correct and ask whether they are still willing to participate. This 'virtual group' will then be contacted by the PPG with copies of the PPG minutes and for feedback on both this and any future surveys.

At the request of members of the PPG to start using social media, the Practice has also identified a Facebook address which will be used to post information about services and practice news. It will not be enabled to receive feedback from patients, to avoid the risk of abuse but feedback will be invited using other methods, including letter, email to the practice email address or via the practice website.

The Practice Manager has also arranged to work with a group of pupils from a local school to engage interest in the work done in the practice and for this group to take part in surveys and promotional work. An initial meeting has been organised during April 2015.

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

The result of these actions will increase the numbers of the PPG and reach a wider patient group, including carers and younger people, it is particularly hoped that the introduction of social media will attract the interest of a younger age group.

The findings will be advertised by 31 March initially on our website then by posters later in the year, following the change of clinical system.

Priority area 3

Description of priority area: To Evaluate access to the Practice for Disability Groups

What actions were taken to address the priority?

A patient with a physical disability and using a wheelchair was asked to check access to all areas of the Practice
A patient with learning disabilities was asked for their opinion about accessing information about the Practice
The Practice and PPG wrote separately to Shropshire Council requesting disabled parking spaces to be put nearer to the entrance to the surgery/pharmacy/hospital as the only ones available were at the opposite end of a long car park.

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

The wheelchair user said they were happy that access was of an acceptable standard and that they had no concerns

The patient with learning disabilities thought that some of the signage could be improved but that this needed much more detailed thought and should be an ongoing priority for the forthcoming year. The practice will therefore work with the Learning Disability Team over the course of 2015 to improve signage and notices, including information on our website.

Shropshire Council said that they had no funds available to allocate spaces until the new financial year and will meet with the Practice and PPG in April 2015.

There will be a summary of these findings will be put on our website by 31 March.

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):

A survey had been conducted by the PPG on younger patients with asthma. However, feedback from this particular patient group identified that they considered that they were happy to manage their condition without any further intervention from either the PPG or the Practice, so no further action or progress was necessary.

A similar survey had been conducted by the PPG on patient with arthritis. This identified the need for more access to pain management services. The result of this was the introduction into the Practice of clinics run by Pain Management Solutions, who now provide a successful service to our patients.

The care coordinators were introduced into the Practice and offer a service to patients by follow up after discharge from hospital and identifying sources of self help groups or other help.

The PPG and Practice work together to provide Open Days, where service providers from health, social care or the voluntary sectors set up stalls in the surgery and patients are invited in to network with each other and obtain information from the providers. These have been very successful and will continue.

Following patient feedback the Practice have changed the appointments and telephone systems to make improvements to access, including extra staff answering the phones. There are further improvements planned for 2015.

4. PPG Sign Off

Report signed off by PPG: YES

Date of sign off: 23 March 2015

How has the practice engaged with the PPG:

Through regular meetings (every 6 weeks) and ad-hoc meetings as required.

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

The practice has addressed this through Open Days at the surgery and outreach to local organisations, including schools.

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

Yes, through the GP survey, patient questionnaires, Open Days, complaints and suggestions. This is now being supplemented with comments captured through the Friends and Family Test and will be further extended with the imminent launch of a virtual Patient Reference Group as part of this action plan.

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

Yes, a sub-group worked with the practice to formulate priorities and action plan – these were then discussed and agreed by the PPG.

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

Historically our work with the practice has delivered improvements in services offered to patients and carers notably in appointments booking, pain management, and co-ordination of community care including self-help. The outcomes of this plan are not yet visible but we expect to see measurable improvement in appropriate access to a named doctor, closer disabled parking, and broader demographic engagement with patients and carers through the virtual Patient Reference Group.

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

The PPG and practice continue to work well together. We both would have preferred to have been able to progress these plans to completion by now but a number of factors have impacted on this: the appointment of a new Practice Manager, diversion of practice resources resulting from CQC inspection, an extraordinarily busy winter season and the need for the county council to delay the provision of disabled parking spaces to the 2015/2016 financial year.