

Practice Name: **Park Green Surgery**

Practice Code: **N81088**

Signed on behalf of practice (type name): **Isobel Chetwood**

Date: **17th March 2015**

Signed on behalf of PPG (type name): **Dr Kim Monaghan**

Date: **17th March 2015**

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

Does the Practice have a PPG? YES /NO												
Method of engagement with PPG: Face to face, Email, Other (please specify) Regular face to face meetings and email communication between meetings												
Number of members of PPG: 11												
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	5540	5657		Practice	2066	918	1381	1550	1751	1451	1096	984
PRG	1	10		PRG					4	2	2	3

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	5141	24	0	239	5	21	24	19
PRG	11							

	Asian/Asian British					Black/African/Caribbean/Black British			Other	
	Indian	Pakistani	Bangladeshi	Chinese	Other Asian	African	Caribbean	Other Black	Arab	Any other
Practice	176	5	8	21	54	12	4	5	0	
PRG										

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 have tried very hard to recruit members from all groups and backgrounds but this has proved very difficult. We continue to try and appeal to all groups. We welcome comments and suggestions through our website and feedback slips in the waiting room.

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**

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:

Invited speakers to attend the PPG meetings; i.e. Pathways (supporting black and minority ethnic communities) Medicines Management representative from CCG – comments received during the meeting and fed back under *Matters Arising* at the following meeting.

Suggestions, comments and ideas received in practice discussed with PPG members.

GP Survey results from 2013-2014 presented and full discussion at meeting in September 2014. Identification of priorities and action planning done subsequently.

Discussion of “news” in the practice; changes to the appointments system, introduction of electronic prescribing, new staff receptionists and new GP partner.

Introduction of friends and family test. We noted that we generally only received comments from patients who would be happy to recommend the practice to their friends and family but not those who say they wouldn't – so we don't know why. PPG members happy to come into the practice and sit in the waiting room to encourage patients to provide us with feedback both good and bad!

How frequently were these reviewed with the PRG?

Reviewed at each of the quarterly meetings.

3. Action plan priority areas and implementation

Priority area 1
<p>Description of priority area:</p> <p>Online Appointment and Repeat Prescription ordering. Introduction of electronic prescribing.</p>
<p>What actions were taken to address the priority?</p> <p>We have advertised the facility to book appointments and order repeat medication online to all our patients. We have an information leaflet, a poster in the waiting room, a message on the repeat prescription slip, a downloadable form on the website and we make use the Jayex message board.</p> <p>The practice went live with Electronic Prescribing in May 2014. As with the online services we used all means of advertising available to promote this. All our reception staff have worked in the practice for a number of years and are very experienced. We appointed one of the girls as a champion for the new system because it is very complex. This has ensured that there is continuity for both staff and patients. She has an excellent relationship with all the local pharmacies, nursing homes and the Medicines Management team from the CCG.</p>
<p>Result of actions and impact on patients and carers (including how publicised):</p> <p>The number of patients registering to use our online services is growing rapidly. The EPS nominations are slowly increasing and this has resulted in a much more streamlined service for all our patients. It also has the effect of limiting the number of phone calls coming into the surgery as patients can both book and cancel appointments on line. We do have a switchboard in reception to field all the incoming calls and feel and note that we have always scored highly with regard to telephone access in past surveys. We are sure this is a contributory factor. In addition we have a number of direct dial numbers which are given to patients and other outside agencies as appropriate so that they do not need to contact the surgery via the main number.</p>

Priority area 2

Description of priority area:

Access to GP and Nurse appointments in the face of increasing demand.

What actions were taken to address the priority?

In January 2014 we reviewed our appointments system. In the past we had one duty doctor on throughout the day seeing patients with problems which could not wait. We felt that this created unacceptable pressure for the duty doctor and so a radical change was needed. All GPs now have a mixture of routine appointments (released 4 weeks in advance/on the day) some duty appointments as well as telephone consultations. This has resulted in more routine appointments being made available overall, all urgent calls being triaged and the majority of patients attending earlier in the day. Since the introduction of the new system we have made some minor changes as we have been going along and continue to monitor things. We had considered introducing early morning appointments (8 am), lunchtime surgeries with a 12.30 pm start and later appointments (up to 6 pm). This has not been required but we will continue to review the demand and capacity adjusting the templates as appropriate.

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

The changes to the appointments system have resulted in better access. The GPs also feel much less pressurised and enjoy the mixture of both routine and acute appointments in their surgeries. This also allows greater flexibility for patients who require a duty day appointment to see the GP of their choice rather than being booked into the duty doctor who is on that day.

There has not really been a need to advertise the change to the system but we do have an appointments leaflet and poster which advises patients of the different types of appointment that are available. A copy of this is available if required.

Priority area 3

Description of priority area:

Keeping patients informed about changes in the practice/new services. Improving communication and regular feedback.

What actions were taken to address the priority?

In March 2014 we changed our Website provider so that we are now able to update the site very easily ourselves. We can upload PDF Information leaflets, insert links to other useful sites and we have a newsfeed. We have considered the possibility of including social network links to *Twitter* and *Facebook* and will continue to explore this option.

We continue to use the MJoG software to send out appointment reminders. We are now also using this to send Friends and Family questionnaires to all patients within 2 hours of their appointment. There is also a FFT link on the website as well as paper questionnaires in the waiting room and doctors/nurses surgeries. In addition, if appropriate, GPs will take these out on home visits.

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

We continue to receive good feedback from patients. We use a variety of means to communicate to patients as described above so that we “capture” the views of our total practice population. In this way we are confident that we are doing our best to reach all groups to enable us to action any concerns or suggestions they may wish to offer.

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 found over the years that we have been participating in the Patient Participation DES and carrying out the GPAQ surveys, there are common themes which occur every year; access to GP of choice (waiting times) and the ability to make use of online services. We continue to make improvements in the face of the increasing demand (especially during the winter months) and feel particularly that the changes we have made to our appointments system have facilitated this.

We accept that online services are very important to patients – of all ages – and with this in mind we are expanding the services we offer. There are a growing number of patients registering to use on-line services and we continue to encourage this.

4. PPG Sign Off

Report signed off by PPG: ~~YES~~/NO

Date of sign off: **27th 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?

We continue to make efforts to obtain the views of our hard to reach groups. Last year we invited a speaker from Pathways to attend and she provided a very valuable insight into the difficulties that patients from ethnic minority groups experience when trying to access healthcare. In October 2014 two speakers from Pathways attended a half day training session for Receptionists held at Waters Green Medical Centre which covered the same topic.

Two of our receptionists are completing the basic sign language course – Level 1. The tutor (who is deaf) has reviewed our patient information leaflet and made suggestions with regard to revising the wording to make this deaf-friendly. The tutor is filming a short video signing the instructions for registering at the practice which we will post onto our website at the earliest opportunity.

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

As outlined above we continue to receive patient and carer feedback from a variety of sources; written suggestions, website feedback and FFT responses.

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

Yes the PPG was involved in the discussions about the patient survey results from which an action plan was developed.

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

Yes we feel from the feedback we have received that we have improved the service we offer.

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

We are happy to continue to meet regularly with our PPG and will do our best to encourage a wider membership. We will also consider the use of *Twitter* and *Facebook* to attract a wider audience.