

Annex D: Standard Reporting Template

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

Practice Name: SALTERS MEADOW CENTRE

Practice Code: M83072

Signed on behalf of practice:  Date: 27TH MARCH 2015

Signed on behalf of PPG: _____ Date: _____

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

Does the Practice have a PPG? YES / NO YES WEB BASED																																					
Method of engagement with PPG: Face to face, Email, Other (please specify) VIA WEB PAGE																																					
Number of members of PPG: 96																																					
<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: 15%;">%</th> <th style="width: 35%;">Male</th> <th style="width: 35%;">Female</th> </tr> </thead> <tbody> <tr> <td>Practice</td> <td>5966</td> <td>5840</td> </tr> <tr> <td>PRG</td> <td>44</td> <td>52</td> </tr> </tbody> </table>	%	Male	Female	Practice	5966	5840	PRG	44	52	<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%;"><u><16</u></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>1782</td> <td>970</td> <td>1188</td> <td>1348</td> <td>1788</td> <td>1653</td> <td>1807</td> <td>1270</td> </tr> <tr> <td>PRG</td> <td>0</td> <td>5</td> <td>10</td> <td>10</td> <td>17</td> <td>28</td> <td>22</td> <td>4</td> </tr> </tbody> </table>	%	<u><16</u>	17-24	25-34	35-44	45-54	55-64	65-74	> 75	Practice	1782	970	1188	1348	1788	1653	1807	1270	PRG	0	5	10	10	17	28	22	4
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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	7147			8	3	2	4	2
PRG	96							

	Asian/Asian British					Black/African/Caribbean/Black British			Other	
	Indian	Pakistani	Bangladeshi	Chinese	Other Asian	African	Caribbean	Other Black	Arab	Any other
Practice	9	1		7	10	2	3			
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:

VIA POSTERS IN WAITING ROOM, MESSAGES ON REPEAT PRESCRIPTION SIDE SLIPS, WEB PAGE INFORMATION, DETAILS ON PRACTICE LEAFLET

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:

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2. Review of patient feedback

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

OUR PPG IS VIRTUAL SO ALL FEEDBACK HAS BEEN VIA WEB

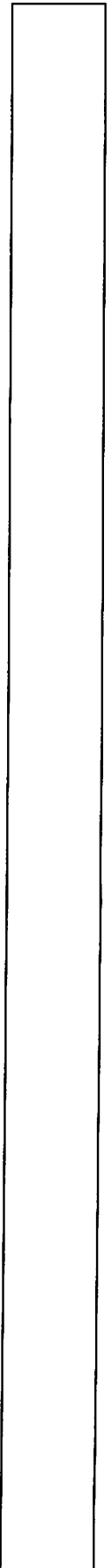
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How frequently were these reviewed with the PRG? IF NECESSARY FEEDBACK ACTIONED IMMEDIATELY VIA WEB OTHERWISE FEEDBACK REVIEWED PRIOR TO AGREEMENT WITH PPG OF CONTENT OF ACTION PLAN.

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3. Action plan priority areas and implementation

Priority area 1	
Description of priority area:	TELEPHONE SERVICE – PROBLEM WITH HIGH VOLUME OF CALLS SO CAN BE A FAIRLY LONG WAIT TO BE ANSWERED
What actions were taken to address the priority?	THE PRACTICE RECOGNISES THAT WE HAVE A HIGH VOLUME OF CALLS AND HAVE ACTIVELY PROMOTED/ENCOURAGED PATIENTS TO SIGN UP FOR ONLINE BOOKING OF APPOINTMENTS AND ONLINE ORDERING OF REPEAT MEDICATION TO EASE THE VOLUME OF CALLS FOR ROUTINE MATTERS.
Result of actions and impact on patients and carers (including how publicised):	STILL HAVE A HIGH VOLUME OF CALLS BUT THERE ARE MORE PATIENTS NOW SIGNING UP TO ONLINE SERVICES. WE PUBLISH THIS INFORMATION ON THE WEB AND ON PRESCRIPTION SIDE SLIPS. ALSO WE RECENTLY STARTED USING A TEXT MESSAGING SERVICE (MJOG), A POSTSCRIPT IS ADDED TO ALL CORRESPONDENCE GOING OUT TO PATIENTS. WE HAVEN'T AS YET RECEIVED ANY FEEDBACK FROM THE PPG. IT IS NOT A PARTICULARLY ACTIVE GROUP THERE IS NO CHAIRPERSON. WE HAVE TRIED A GROUP MEETING PPG IN THE PAST BUT WERE UNABLE TO RECRUIT ENOUGH MEMBERS FROM DIFFERENT SECTIONS OF THE PRACTICE POPULATION TO MAKE IT A VIABLE AND PRODUCTIVE MEETING.



Priority area 2

Description of priority area:

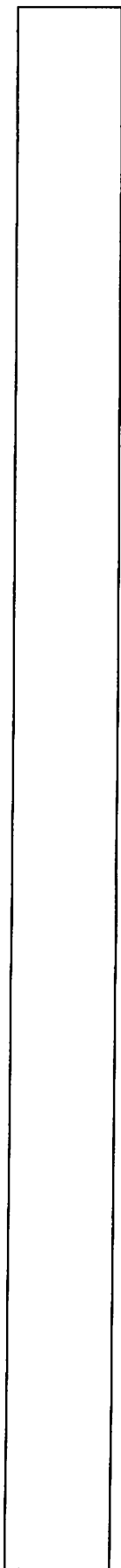
APPOINTMENTS SYSTEM – REQUESTS FOR URGENT APPOINTMENTS AND LACK OF INFORMATION IF SURGERY IS RUNNING LATE

What actions were taken to address the priority?

WE HAVE MADE EVERY EFFORT EVEN DURING VERY BUSY SURGERY TIMES TO BE MORE PROACTIVE IN INFORMING PATIENTS WHEN SURGERIES ARE RUNNING LATE. REQUESTS FOR URGENT APPOINTMENTS ARE ALWAYS ACTIONED AS SOON AS THE REQUEST IS MADE IT IS THEN THE CLINICIAN'S DECISION TO PRIORITISE. PATIENTS ARE ALWAYS SEEN SAME DAY OR NEXT DAY. URGENT REQUESTS FOR CHILDREN TO BE SEEN WHEN NO APPOINTMENTS ARE AVAILABLE ARE ALWAYS ACCOMODATED SAME DAY.

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

ALTHOUGH THIS WAS HIGHLIGHTED BY THE PPG AS AN AREA OF CONCERN WE HAVE VERY FEW COMPLAINTS ABOUT LATENESS OF SURGERIES. WITH REGARD TO APPOINTMENTS WE HAVE BEEN OFFERING LATE EVENING AND SATURDAY MORNING APPOINTMENTS SINCE OCTOBER 2014 WHICH HAS BEEN PUBLICISED IN THE WAITING ROOM AND ON THE WEBSITE, ALSO PRESCRIPTION SIDE SLIPS. HOWEVER THE UPTAKE IS VERY LOW WHICH WOULD SUGGEST THAT OUR PATIENT ACCESS IS EXTREMELY GOOD AND NOT A PRIORITY ISSUE.



Priority area 3

Description of priority area:

RECEPTION STAFF – COMPLAINTS RE: RUDENESS/ABRUPTNESS

What actions were taken to address the priority?

WE HAVE A CALL RECORDING SYSTEM OF WHICH THE PATIENTS ARE MADE AWARE WHEN THEY TELEPHONE THE SURGERY. WE HAVE BEEN USING THIS AS A TRAINING TOOL IF COMPLAINTS ARE MADE ABOUT A RECEPTIONIST BEING RUDE OR ABRUPT OVER THE TELEPHONE. STAFF HAVE FOUND THIS EVALUATION TO BE USEFUL.

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

WE DO TELL THE PATIENT IF HE/SHE COMPLAINS ABOUT A RECEPTIONIST BEING RUDE OVER THE TELEPHONE THAT THE CALL WILL BE MONITORED AND RECEPTIONIST ASKED TO LISTEN TO THE CALL. THE PATIENT IS ALSO INVITED TO LISTEN TO THE CALL BEING PLAYED BACK AS THIS IS A TWO WAY PROCESS

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):

PROBLEMS WITH TELEPHONE SYSTEM HAS BEEN AN ONGOING CONCERN HOWEVER WE DO HAVE FIVE LINES OPERATING TO THE SURGERY AND A MEMBER OF STAFF ANSWERING EACH LINE. WE DO NOT HAVE CAPACITY WITHIN THE PRESENT BUILD TO HAVE MORE LINES OR STAFF CAPACITY TO ANSWER MORE LINES. AS WE ARE PROMOTING THE USE OF OUR ONLINE SERVICES FOR BOOKING APPOINTMENTS AND ORDERING REPEAT PRESCRIPTIONS HOPEFULLY AS UPTAKE INCREASES THIS WILL HAVE A GOOD EFFECT AND REDUCE THE NEED FOR PATIENTS TO RING THE SURGERY FOR ROUTINE MATTERS.

OVER THE LAST FEW YEARS SINCE THE PPG HAS BEEN IN EXISTENCE AND ALSO FOR THE REST OF OUR PRACTICE POPULATION NOT INVOLVED IN THE PPG THE BIGGEST AREA OF COMPLAINT HAS BEEN THE CAR PARK WHICH IS A CONSTANT SOURCE OF CONCERN. WE HAVE ONLY ONE DISABLED BAY FOR A PRACTICE OF NEARLY 12000 PATIENTS, VERY FEW SPACES FOR THE REST OF THE PATIENTS, WHICH HAVE TO BE SHARED WITH LOCAL PHARMACY, DENTAL PRACTICE, VARIOUS SHOPS, COMMUNITY STAFF WHO WORK FROM THE HEALTH CENTRE AND THE DOCTORS AND STAFF. THERE HAVE BEEN NUMEROUS COMPLAINTS ABOUT CARS BEING DAMAGED, THE SURFACE OF THE CAR PARK IS NOT GOOD AND THE NARROW FOOTPATH AT THE SIDE OF THE CAR PARK HAS ALSO BEEN THE CAUSE OF MORE THAN ONE ACCIDENT TO PATIENTS AS A RESULT OF PAVING SLABS NOT BEING FLAT. ALL THIS HAS BEEN HIGHLIGHTED BUT AS THE PRACTICE DOES NOT OWN THE BUILD OR THE SURROUNDING PARKING AREA THERE IS NOTHING THAT WE CAN DO TO REASSURE THE PATIENTS/PPG THAT THEIR CONCERNS WILL BE ADDRESSED.

PATIENT CONFIDENTIALITY AT RECEPTION HAS BEEN HIGHLIGHTED AS A PROBLEM IN PREVIOUS YEAR. THIS HAS BEEN SUCCESSFULLY ADDRESSED BY USE OF A SIDE-ROOM WHICH HAS BEEN DESIGNATED AS A PRIVACY ROOM FOR PATIENTS USE.

PATIENTS HAD BEEN MAKING ENQUIRIES ABOUT VOLUNTARY DRIVERS SO DETAILS WERE PUBLISHED IN THE LOCAL LIBRARY AS WELL AS IN THE SURGERY.

SURGERY SIGNPOSTING HAS IMPROVED AS A RESULT OF ACTION PLAN. PATIENTS VERY RARELY NEED TO ASK DIRECTIONS TO VARIOUS PARTS OF THE HEALTH CENTRE.

4. PPG Sign Off

Report signed off by PPG: YES/NO NO

Date of sign off:

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 FACT THAT WE HAVE A VIRTUAL CCG IS WELL PUBLICISED. THERE WAS A VERY POOR RESPONSE IN FACT HARDLY ANY INTEREST IN THE PAST WHEN A GROUP MEETING WAS PROPOSED TO MEET MONTHLY AT THE HEALTH CENTRE, WHICH IS WHY A VIRTUAL PPG WAS SET UP. OBVIOUSLY IT IS WEB BASED AND FOR SOME SECTIONS OF THE PRACTICE POPULATION THIS COULD BE PROBLEMATIC. IT HAS ALWAYS BEEN DIFFICULT TO GET PATIENTS TO JOIN. THE PPG HAS BEEN INVOLVED IN THE AGREEMENT OF PRIORITY AREAS AND THE SUBSEQUENT ACTION PLAN. WE REVIEW THE SERVICE WE OFFER TO ALL OF OUR PATIENTS CONTINUALLY AND HOPEFULLY ANY ACTIONS IMPLEMENTED AS PART OF ACTIONS RECOMMENDED BY OUR PPG WILL HAVE BEEN BENEFICIAL FOR ALL OUR PATIENTS. OUR FEEDBACK FROM PATIENTS AND CARERS IS MAINLY VERBAL VIA FRONT DESK RECEPTION STAFF, OCCASIONALLY TELEPHONE CALLS MADE TO THE PRACTICE MANAGER OR VIA CLINICIANS. PATIENTS SOMETIMES WRITE TO THE PRACTICE MANAGER IF THEY HAVE ANY CONCERNS. IT IS VERY UNUSUAL FOR ISSUES TO BE HIGHLIGHTED VIA OUR WEBSITE.

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