

Standard Reporting Template

Devon, Cornwall and Isles of Scilly Area Team
 2014/15 Patient Participation Enhanced Service – Reporting Template

Practice Name: Seaton and Colyton Medical Practice

Practice Code: L83007

Signed on behalf of practice: Date: 20.3.15

Signed on behalf of PPG: Date: 18.3.15

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) Meetings and email																																					
Number of members of PPG: Currently 9																																					
Detail the gender mix of practice population and PPG: <table border="1" style="width: 100%; border-collapse: collapse; margin-top: 10px;"> <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>3461</td> <td>3988</td> </tr> <tr> <td>PRG</td> <td>5</td> <td>4</td> </tr> </tbody> </table>	%	Male	Female	Practice	3461	3988	PRG	5	4	Detail of age mix of practice population and PPG: <table border="1" style="width: 100%; border-collapse: collapse; margin-top: 10px;"> <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></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>PRG</td> <td></td> <td></td> <td></td> <td></td> <td></td> <td>3</td> <td>3</td> <td>3</td> </tr> </tbody> </table>	%	<16	17-24	25-34	35-44	45-54	55-64	65-74	> 75	Practice									PRG						3	3	3
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Detail the ethnic background of your practice population and PRG: The practice currently collects ethnicity information from all new patients. However, the information is not complete for our whole population and our clinical system does not entirely match to the boxes below.

	White				Mixed/ multiple ethnic groups			
	British	Irish	Gypsy or Irish traveller	Other white	White &black Caribbean	White &black African	White &Asian	Other mixed
Practice								
PRG	9							

	Asian/Asian British					Black/African/Caribbean/Black British			Other	
	Indian	Pakistani	Bangladeshi	Chinese	Other Asian	African	Caribbean	Other Black	Arab	Any other
Practice										
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:

Our patient list size is now 7449. We have a predominately retired/white British population with more females than males and small numbers from different cultural groups. The original members of the 'face to face' group were volunteers from the 'virtual group'.

The 'face to face' group until this year was made up of six members plus practice representation from Loraine Robinson the Practice Manager and Kirstine House the Deputy Practice Manager. We have now recruited three further patient members and we are currently in discussion with the local schools to recruit two six form pupils and at least one parent/working person. We believe that this is manageable, representative and should hopefully ensure that the group is well attended at each meeting.

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:

We are aware that we have a number of nursing homes in our practice area. The practice is happy to consult with the nursing homes on any matters that are appropriate. The homes will always be invited to take part in any surveys conducted by the practice.

2. Review of patient feedback

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

We last carried out a formal CFEP questionnaire in the autumn of 2013 which was reported on the practice website in March 2014.

This form of survey will now be completed on a three yearly cycle. We believe the feedback to be worthwhile but not necessarily on an annual basis and it is our intention to carry out smaller surveys on individual topics with the assistance of the PPG. At the end of 2014 practices were required to introduce a simple satisfaction questionnaire called 'Friends and Family'. The questionnaire provides patients with the opportunity to provide anonymous feedback on their experience when accessing any part of the service. There are two questions:-

'How likely are you to recommend our GP Practice to friends and family if they needed similar care or treatment?

'Is there any feedback you would like to give the practice about what you feel we do well/not so well?

Whilst completion of the 'Friends and Family' test is not obligatory we hope the response will grow over coming months as patients get used to the concept of being able to feedback on their experiences during any visit to the surgery. Questionnaires are available in both waiting rooms and on the practice website.

The results of the first 40 completed 'Friends and Family' questionnaires were discussed with the PPG. The results were very encouraging with 36 out of 40 patients replying that they would be 'extremely likely' or 'likely' to recommend our practice to friends and family for similar care or treatment.

How frequently were these reviewed with the PRG?

The first collection of data was discussed with the Patient Participation Group at the last meeting and will be regularly reviewed at forthcoming meetings.

3. Action plan priority areas and implementation

Priority area 1

Description of priority area:

1. Increase the numbers of group representatives.

What actions were taken to address the priority?

The PPG group is now entering its third year. Originally there were eight patient members which seemed an ideal number but this reduced to six. It became clear that it is difficult to choose a perfect date for the meetings and therefore we needed to increase representation. We have successfully recruited three new members who attended the last meeting. Each time a new member joins the group we increase our skill mix. We are fortunate to have members who have a background in industry, the forces, practice management, learning disabilities, the legal profession with experience of working alongside social services and the local Senior Voice, to mention a few. However the PPG are keen to try and involve some younger patients and we have approached two of the local senior schools to see whether we can attract sixth form students, particularly if they have an interest in a medical career. We also approached the local primary school to seek a parent/working parent of a child of primary age.

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

We understand that the schools are actively seeking student volunteers and the local primary school is advertising in their newsletter to parents. Younger patients will add another perspective to the group to make the representation more rounded.



Priority area 2

Description of priority area:

Increase the identity of the group

What actions were taken to address the priority?

We have publicised our group on posters, on our website and in newsletters. We also introduced an email account for patients to make contact with the group and contact boxes in both waiting rooms.

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

It has been very interesting that no member of the practice population has approached the PPG despite our attempts to increase their profile. The group have discussed this on several occasions. It has been suggested that patients will only seek representation if they are concerned about some element of the service. The fact that there has not been any approach to the PPG may suggest that patients in general are satisfied with the service as borne out by recent surveys. However, the practice should always be looking to improve services to meet the demands and needs of the local population and the best feedback is from service users. We will therefore continue to publicise the group and encourage patients to make contact either by leaving suggestions/messages in the boxes in reception or by email at scppg@outlook.com. The group will also be helping us with future surveys and information gathering exercises which will give them the opportunity to talk to patients face to face.

Priority area 3

Description of priority area:

New housing developments in Seaton – how this will impact on local services

What actions were taken to address the priority?

Within the last year building has commenced on a large site beside Tesco's with the expectation of 222 new homes. There is also a new small development on the old St Clares site. This increase in housing and the numbers of people it will bring into Seaton will undoubtedly impact on the two medical practices in Seaton and on the local schools. The PPG are keen to work with the practice to understand the issues/difficulties that this will create and to be part of discussions in how we expand our services to meet this extra demand.

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

It is in the interest of all our patients that we continue to provide services which are patient centred and fit for purpose and meet the challenge of increasing numbers of registered patients. The PPG are representatives for our whole practice population and therefore are well placed to help us implement change where change is required. This links with priority 2 – for the group to be truly representative we need to increase their profile so that patients feel able to interact with the PPG which in turn will open dialogue with the practice.

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):

Three areas were discussed as actions for 2013/14

1. To review the reminder/recall system.

The practice sends out thousands of letters each year to remind patients to attend for reviews and blood tests. In many cases patients have to re-attend at different times of the year because they have multiple illnesses for example heart disease, stroke, diabetes, asthma and COPD. It was clear that the system needed attention to ensure patients were called at the right time and not called excessively. In other words if patients needed to have a review for diabetes and heart disease we wanted to try and ensure the reviews were completed at the same time. Not only is this better for the patient but it frees up valuable appointments at a later date. This has been a large piece of work and it will continue. The GPs have also recruited a new member of staff who will be responsible for the recall process.

2. To review opening times.

The practice continues to operate from 8am until 6pm Monday to Friday. There has been much discussion in the press and media about the government agenda for seven day a week opening. It is fair to say that the GPs believe that we have an excellent 'out of hours' service from 6pm to 8am Monday to Friday and over the weekend and this fits well with our heavily committed core hours. We will continue to review our opening hours periodically taking into account local and national policy.

3. Waiting times in practice reception.

There is no doubt that patients do sometimes have to wait longer than intended in the waiting room but this can be due to several factors including different GPs methods of working, complicated patients and emergencies. We remain mindful not to keep patients waiting although sometimes it is beyond our control. We do however realise it is important to keep patients updated.

4. PPG Sign Off

Report signed off by PPG: YES

Date of sign off: 18.3.15

How has the practice engaged with the PPG:

By face to face meetings and by email

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

Newsletters, website and general patient information in waiting rooms

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

This year we have used the Friends and Family Test. Furthermore, the staff members are encouraged to notify the whole practice when they receive verbal thanks and praise from any member of the practice population. Suggestions and complaints are reviewed by the appropriate members of the team.

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

The priority areas have evolved over the year as discussed with the PPG

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

This year our actions have been about creating a more robust PPG so that they can work more closely with patients. This is something we will continue to work on so we get better feedback from our patients, which in turn will help us strengthen our services to match increased demand.

We have also much improved our recall systems which will have a long term impact on patient care and availability of appointments.

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

We are very fortunate to have an extremely supportive PPG who value the practice and wish to become more actively involved.

