Annex D: Standard Reporting Template

Leeds Area Team

2014/15 Patient Participation Enhanced Service – Reporting Template

Practice Name: Thornton Medical Centre Leeds 12 1JE

Practice Code: B86060

Signed on behalf of practice: Mrs Pamela Wilson Date: 26th March 2015

Signed on behalf of PPG: Mr Edward Wilson Date: 26th March 2015

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

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| Does the Practice have a PPG? **YES**  |
| Method of engagement with PPG: **Mainly face to face at meeting, also email/telephone communication between meetings** |
| Number of members of PPG: 16 |
| Detail the gender mix of practice population and PPG:

|  |  |  |
| --- | --- | --- |
| % | Male  | Female  |
| Practice | 4499 | 4407 |
| PRG | 5 | 11 |

 | Detail of age mix of practice population and PPG:

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| % | <16 | 17-24 | 25-34 | 35-44 | 45-54 | 55-64 | 65-74 | > 75 |
| Practice | 1600 | 845 | 1446 | 1188 | 1236 | 977 | 723 | 786 |
| PRG | 0 | 0 | 0 | 3 | 0 | 5 | 8 | 0 |

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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  |  |  |  |  |  |  |  |  |
| PRG | 15 |  |  |  |  |  |  |  |

|  |  |  |  |
| --- | --- | --- | --- |
|  | Asian/Asian British | Black/African/Caribbean/Black British | Other |
|  | Indian | Pakistani | Bangladeshi | Chinese | Other Asian | African | Caribbean | Other Black | Arab | Any other |
| Practice |  |  |  |  |  |  |  |  |  |  |
| PRG |  |  |  |  |  |  | 1 |  |  |  |

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| 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:**The practice have advertised for new members for the Patient Participation Group in the practice newsletter, practice booklet, practice website (with link to an application form) and in the reception.** **We have found it difficult to recruit from a wide mix of patients because not all people are willing to give up their time, or are interested in the role.** |
| 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? **We have a high proportion of care home patients compared to other practices.****We have relatively high levels of jobseekers or who live on low incomes.**If you have answered yes, please outline measures taken to include those specific groups and whether those measures were successful:**Unfortunately the vast majority of our care home patients have complex needs and many have dementia so would find it difficult to sit through/contribute to our PPG meetings.****We have advertised the PPG at our local community centre to reach out to patients who might not come into the surgery on a regular basis. e.g. those who go to the centre for a meal or to use the laundry facilities.****As a result of this closer working we have recruited a member of staff from the community centre to join our PPG.** |

1. Review of patient feedback

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| Outline the sources of feedback that were reviewed during the year:**The PPG have seen patient feedback from the Patient Survey we did as part of Productive General Practice (part of the Knowing How We Are Doing module).****This included asking patients how they feel about booking an appointment, being greeted at reception, the waiting area, information available for patients and finally how they felt about the consultation with a healthcare professional.****The PPG have also seen the first month’s data from the Friends and Family Test (Dec 2014).****The PPG have also been used to give their own feedback and opinions to the CCG communications team on the Brainbox Survey,” getting involved” and data sharing.** **The practice also used the group as a sounding board and their opinions were sought on extended hours, data sharing, using SMS texts, Leeds Care Health Record and telephone triage.**  |
| How frequently were these reviewed with the PRG? **As and when the patient feedback was collected i.e. Productive General Practice work started November 2014, Friends and Family Test started Dec 2014.** |

Action plan priority areas and implementation

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| Priority area 1 |
| Description of priority area:**The appointments system – how to reduce the number of “Did Not Attends”** |
| What actions were taken to address the priority?* **To look at the extend of the problem**
* **A PPG member agreed to spend time ringing patients who have DNAd to find out the reasons why they are missing appointments without cancelling**
* **A poster was designed to display in reception to bring attention to the number of appointments lost every month**
* **A letter was drafted by the PPG to send to patients after they miss their appointments.**
* **A computer message now flashes up on the patients records if they have missed an appointment within the last month so that reception staff can discuss opportunistically with patient when they book another appointment**
* **The practice now use MJOG software to send text reminders to patients giving them the option to text back to cancel their appointment**
 |
| Result of actions and impact on patients and carers (including how publicised):**We are still working with our PPG on this priority area – as we did not have the MJOG software until February 2015 we haven’t noticed a reduction in the number of DNAs yet.** **We plan on getting a Waiting Room Media Screen which we can use to display the information about the importance of cancelling appointments.** |

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| Priority area 2 |
| Description of priority area:**Zero tolerance of abuse from patients against staff** |
| What actions were taken to address the priority?* **Some of the PPG members agreed to compose articles and posters for our newsletters and practice booklet bringing the problem to light.**
* **The PPG want us to run a message on our appointments call screen informing patient that we are a zero tolerance practice. We plan on getting a Waiting Room Media Screen to display this.**
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| Result of actions and impact on patients and carers (including how publicised):**This is an ongoing project with the PPG and we are still working out ways to best tackle this problem. It has brought the problem to the fore and gives the practice support.**  |

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| Priority area 3 |
| Description of priority area: **Improving how we get information out to our patients.** |
| What actions were taken to address the priority?* **The PPG feel the practice could improve the way we communicate with patients about health education and the services the practice offers etc e.g. Facebook, Twitter, increased use of text messages, video screen in reception. One main areas that needs to be clearer to patients is the way we handle patient data, how their data will be used and by whom, also what to do if they wish to opt out (especially in light of the confusion around the care.data programme). We have invited a member of the CCG Comms Team to discuss how we progress this**
* **The PPG helped us a great deal by proof reading messages or information before it is passed on to our patients. They give us a clear idea if the material is appropriate, clear and is easily understood.**
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| Result of actions and impact on patients and carers (including how publicised):**We plan on getting a Waiting Room Media Screen which we can use to display information to patients in the waiting area. We have applied to the CCG in Dec 2014 to approve funding and are still awaiting confirmation.** |

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):

**Satisfaction with appointment system**

* The practice have been offering extended hours appointments since November 2014 (funded by Leeds West CCG)
* More prebookable appointments, and online appointments are available
* The appointment system is an area the practice will look at under Productive General Practice in 2015/16

**Open Day**

* Following the success of the open day in 2013, another open day was held in September 2014 in conjuntion with the community centre. The PPG also supported a charity fun run for Children In Need arranged by the practice

**A&E attendances**

* We have used funding to run Self Management courses for patients with long term conditions with the aim to get patients to manage their own conditions better. One member of the patient group has attended this 6 week course.

**Improved internet access in the waiting room**

* We now have an information kiosk in reception which links/signposts to various helpful websites (voluntary agencies, local services, Choose and Book, Citizens Advice Bureau etc)
* We have WIFI installed in the waiting area for patients

**Citywide work**

* Two of our PPG members have attended Leeds West CCG Patient Assurance Group meetings and they are familiar with members of the CCG communications team.
1. PPG Sign Off

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| Report signed off by PPG: **by Edward Wilson (PPG Chairman)**Date of sign off: 26.03.2015 |
| How has the practice engaged with the PPG:How has the practice made efforts to engage with seldom heard groups in the practice population? **No, not as yet**Has the practice received patient and carer feedback from a variety of sources? **Yes**Was the PPG involved in the agreement of priority areas and the resulting action plan? **Yes**How has the service offered to patients and carers improved as a result of the implementation of the action plan? **Highlighting areas of concern such as non-attenders making more appointment time for other patients**Do you have any other comments about the PPG or practice in relation to this area of work? **No** |