

Standard Reporting Template

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

Practice Name: Stillmoor House Medical Practice

Practice Code: L82010

Signed on behalf of practice: Mrs S Carthew

Date: 10.3.2015

Signed on behalf of PPG: Mrs M Hammond

Date: 10.03.2015

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																																					
Number of members of PPG: 8																																					
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: 40%;">Male</th> <th style="width: 40%;">Female</th> </tr> </thead> <tbody> <tr> <td>Practice</td> <td>49.3%</td> <td>50.7%</td> </tr> <tr> <td>PRG</td> <td></td> <td>100%</td> </tr> </tbody> </table>	%	Male	Female	Practice	49.3%	50.7%	PRG		100%	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>19.4%</td> <td>9.6%</td> <td>11.9%</td> <td>11.5%</td> <td>14.1%</td> <td>12.4%</td> <td>11.7%</td> <td>9.4%</td> </tr> <tr> <td>PRG</td> <td></td> <td></td> <td></td> <td></td> <td></td> <td>12.5%</td> <td>50%</td> <td>37.5%</td> </tr> </tbody> </table>	%	<16	17-24	25-34	35-44	45-54	55-64	65-74	> 75	Practice	19.4%	9.6%	11.9%	11.5%	14.1%	12.4%	11.7%	9.4%	PRG						12.5%	50%	37.5%
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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	39.8%	0.2%	0.01%	59.24%	0.01%	0.22%	0.07%	0.13%
PRG	87.5%							

	Asian/Asian British					Black/African/Caribbean/Black British			Other	
	Indian	Pakistani	Bangladeshi	Chinese	Other Asian	African	Caribbean	Other Black	Arab	Any other
Practice	0.22%	0.09%	0.04%	0.11%	0%	0%	0%	0%	0.04%	0%
PRG	12.5%									

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:

99% of our practice population are within the 'white' ethnic grouping which includes European ethnic groups. Our PPG group is representative of our ethnic groupings although is limited in its' representation of age groups with all members in the groups 55 and over. The PPG currently has only female members, although the group does benefit from male support. The practice would welcome male PPG members in addition to this.

The PPG is explained on the Practice website and holds several events within the town throughout the year. Information is available to patients in the waiting room and we highlight PPG activities in the newsletter and through notices for equipment purchased etc.

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:

The Practice has a large number of patients registered in Nursing and Residential homes and whilst these patients do not currently form an active part of our PPG we are working closely with the Nursing Teams within the homes, as well as the Dementia Nurse, Community Matron and District Nursing team to gain feedback and engage with this patient group.

2. Review of patient feedback

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

Patient annual survey (CFEP), NHS Choices, 'I want great care' on-line resource, 'Friends and Family' feedback cards

How frequently were these reviewed with the PRG? Annually

3. Action plan priority areas and implementation

Priority area 1
<p data-bbox="201 387 589 422">Description of priority area:</p> <p data-bbox="201 459 450 491">Appointment Access</p>
<p data-bbox="201 611 889 646">What actions were taken to address the priority?</p> <p data-bbox="201 719 1704 810">Additional GP appointments for Mondays to allow better access on-the-day covering peak time. Continue extended hours through evening surgery (Wednesday / Thursday alternative weeks and Saturday morning fortnightly). Promote Practice nurses evening appointments for disease management and follow-up.</p>
<p data-bbox="201 925 1314 960">Result of actions and impact on patients and carers (including how publicised):</p> <p data-bbox="201 1034 1888 1125">Continuing monitoring of appointment system with audit – access to daily telephone triage with GP to ensure appropriate care for urgent cases. Promotion of extended hours via website, waiting room TV, Practice Leaflet, and reception staff. Promoting access to clinical care for all patients including carers and ensuring that appointments where possible meet patients' needs.</p>

Priority area 2

Description of priority area:

Advance booking with GP of choice

What actions were taken to address the priority?

Offer telephone call-back if appointment not available.

Look at GP/ Nurse pre-booking follow-up prior to patient leaving the practice to prevent the need for further call.

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

Continuity of care allows for patients to continue their relationship with their clinician of choice and improves patient satisfaction. Carers find dealing with their regular GP simpler without having to repeat information, and are also able to identify concerns regarding themselves, as well as the patient. If the clinician arranges the next follow-up appointment, this simplifies the process and prevents the need for additional telephone calls / visits to the practice.

Priority area 3

Description of priority area:

Information for patients re Triage system and on-line booking

What actions were taken to address the priority?

Practice to prepare an information leaflet for patients to increase understanding of triage system to ensure that patients are aware of the system in place and the benefits. Also information highlighting on-line appointment access to provide an alternate route for patients.

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

Clearer information for patients will allow better access to a clinician and hopefully easier appointment booking as required.

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 did not participate in the scheme last year as we had not completed a full survey.

However prior to this we have made changes as a result of the PPG review of patient feedback including, a new telephone system with 'straight through' access to dispensary, and the opportunity to give information to patients about our appointment system.

We have previously also increased access to urgent care on the day but employing an Emergency Care Practitioner to see urgent acute cases.

A TV screen was added to the waiting room to allow the practice to provide information to patients in a different format.

We had previously added the opportunity to book a 'non-urgent' telephone slot with a GP of choice to allow telephone access for patients and carers for routine matters.

4. PPG Sign Off

Report signed off by PPG: YES

Date of sign off: 30.01.2015

How has the practice engaged with the PPG:

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

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 practice holds clinics at Bodmin Community College and has access to student views via this route. Outside clinics are held for Mums and Babies at local community centres and Health Visitors can feedback to a GP at a bi-monthly meeting with concerns raised.

The practice promotes feedback from a number of sources including paper, on-line, telephone and in person. Complaints received by the practice often offer a good source of feedback for patient care and are reviewed by the clinical team at a monthly meeting and changes to our service can be implemented following this if appropriate.

Where possible the PPG reviews patient survey information and helps the practice to look at the views of patients, commenting on survey results.

We constantly try to improve our service for patients and appointment access was highlighted by our practice survey. Telephone triage has allowed patients and carers access to a GP on the day, and we have increased our appointment capacity to try to cover busy periods.