Annex D: Standard Reporting Template

Kent and Medway Area Team 2014/15 Patient Participation Enhanced Service – Reporting Template

Practice Code: G82219

Signed on behalf of practice: CMartín Date: 26.03.2015

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

Method of engagement with PPG: Face to face and email

Number of members of PPG: 13

Detail the gender mix of practice population and PPG:

%	Male	Female
Practice	47	53
PRG	46	54

Detail of age mix of practice population and PPG:

%	<16	17-24	25-34	35-44	45-54	55-64	65-74	> 75
Practice	19	10	7	9	14	14	14	13
PRG	0	0	0	15	0	8	46	31

Detail the ethnic background of your practice population and PRG: %

			White		Ŋ	/lixed/ multiple ethnic	groups	
	British	Irish	Gypsy or Irish traveller	Other white	White &black Caribbean	White &black African	White &Asian	Other mixed
Practice	96			1				
PRG	100	0	0	0	0	0	0	0

		Asia	an/Asian British			Black/Africa	an/Caribbean/Bla	ack British	Otl	her
	Indian	Pakistani	Bangladeshi	Chinese	Other Asian	African	Caribbean	Other Black	Arab	Any other
Practice	1			1	1					
PRG	0	0	0	0	0	0	0	0	0	

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:

As a practice we have tried to attract patients from different age groups, young mothers, patients with disabilities as well as patients who reside in nursing homes to join the patient focus group. Our very first meeting attracted one patient with learning disabilities together with her carer however sadly they decided the group was not for them. We continue advertising recruitment to ensure the patient focus group is representative of our registered patients.

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:

2. Review of patient feedback

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

Patient GPAQ Questionnaire 2014/15:-

Despite the changes in the Patient Participation Enhanced Service Specification the practice decided to carry out a patient questionnaire.

The benefits of using a GPAQ questionnaire is that it gives the practice the opportunity to compare its results with a benchmark. Benchmarks are averages and therefore are only treated as such. Overall the group felt that the survey was positive in most aspects of the surgery and care of patients.



Friends and Family Test:

Since December 2014 we have implemented the Friends and Family test which we encourage all of our patients to complete after any consultation with a clinician – please see attached a report of January 2015 results.



Patient Focus Group & Meetings with Members of the CCG & Live it Well Project and Changes at the Outpatient departments by East **Kent Hospital Trust:**

Patient Focus Group - To provide a voice, as patients, on behalf of the population registered at St Peters Surgery.

From time to time members of the CCG have joined our Patient Focus Group meeting by way of informing the group of their roles and how the members of their roles and the work that is being carried out by the Thanet CCG. Live it well project has been discussed with the focus group and details of the changes at outpatient appointments by the local East Kent Hospitals Trust

How frequently were these reviewed with the PRG?

Quarterly meetings with the Patient Focus Group

Notes are taken at the meeting and posted on the practice website and on the patient notice boards



PFG Meeting 04 June 2014.doc



august 2014 (2).rtf



PFGFeb2015.rtf

3. Action plan priority areas and implementation

Priority area 1

Description of priority area:

Patient waiting times

What actions were taken to address the priority?



StPeters_GPAQ_Practice_Peport_2014_pd

tice_Report_2014.pd (Practice report, see page 12) most patients said that they have to wait more than 30 minutes for their appointment considered waiting times to be very good or excellent.

Members of the group felt that the use of the call board to inform patients of their waiting times is helpful and mentioned that it would be beneficial for patients to be either sent a text or telephoned to let them know that the doctor has been delayed and is running late.

When the practitioner is running late often staff will inform patients of the waiting time on arrival, and if the practitioner is running late will advise the patient a choice of going away and coming back later.

Often patients will telephone the surgery before leaving home to see if the practitioner is running late which can save them having to wait at the practice.

It was agreed that the practice will continue to utilise the call board to notify patients when the practitioner is running late, and keep patients informed as and when appropriate.

Patients often need more than the allocated 10 minute slot.

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

A survey of patient waiting times was carried out



The results of the survey were discussed with the members of the patient focus group.

Members of the group agreed that often patient need more than the allocated 10 minute slot.

To combat extended appointments the practice has changed the appointment time allocation in that the practitioner is given catch up time and therefore appointments are spread out throughout the consultation period.

Priority area 2

Description of priority area:

Practice Premise

What actions were taken to address the priority?

Since 1991 our surgery has operated from the converted bungalows in the residential area of St Peters at 6-8 Oaklands Avenue. The practice premises are very small and do not match the needs of the patients and practitioners; it is no longer fit for purpose. The current premises has two consulting rooms, one treatment room, one small health care assistant room, a small reception/patient waiting area,

office administration staff who work in very cramped conditions. There is no rest room for staff to utilise. With very limited space the two practitioners are unable to employ the services of other health care professionals to support in the management of the 4,466 patients. Previously there were four practitioners working at the practice, with two practitioners working part-time utilising a small room which is now occupied by the health care assistant. 13

The practice has made efforts to overcome these deficiencies and already uses the present accommodation flexibly and to full potential, but can really do no more to improve its services within existing capacity. The Practice is actively looking for new premises in the St Peters/ Broadstairs area.

We remain committed to patient care and will continue to involve our patient focus group in the development and services the practice provides.

With the support of NHS England the practice will undergo refurbishment to the practitioners consulting rooms, nurses treatment room and patient waiting area and walkway. This will enhance patient experience, improve infection control in keeping with the Care Quality Commission requirements.

Works will be carried on 3rd April 2015 – 24th April 2015 by Dennison and Ward Flooring, this was mentioned to the focus group in February 2015's meeting, they are looking forward to work and will provide feedback to the practice manager in May 2015's meeting.

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

The practice will undergo refurbishment in April 2015.

The Practitioners' consulting rooms will be redecorated, have new wash basin and new flooring in keeping with the required standards of care.

The nurse's treatment room will have new wash basins and new cabinets.

The patient waiting room will have new flooring.

The patient walkway will have new flooring

The works carried out is publicised on our Jayex board and practice website.

Priority area 3

Description of priority area:

Install baby changing facilities

What actions were taken to address the priority?

Following the request by the patient focus group the practitioners agreed to fund a baby changing facility.

A discussion with the patient focus group and practice staff to establish the best position of the baby changing facilities. A risk assessment was carried out to ensure that the positioning of the baby changing facility.

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

A baby changing facility has been installed in the patient toilet.

A notice has been placed on the outside of the patient toilet informing patients of the facility.

The discussion and notes of the patient group meetings have been posted on the patient notice board.

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):

Actions and Proposed changes for years 1/04/2013 to 31/03/2015

- > Post results of this year's patient survey on the patient notice boards, and on the practice website, together with the report and action plan.
- Monitor the telephone access with a review and audit on the demand with a review of capacity to meet the demand.
- > To keep patients informed of the waiting times using the patient call system and practice website.
- To look at ways of improving waiting times.
- > Text patients reminding them of the their appointments where the patient has agreed this beneficial.
- > To explore ways of improving the ability for patients to speak to the doctor or nurse over the telephone consider telephone triage.
- > Continue to look for new practice premises with the full support of the patient focus group and patients.
- > Consider paving the front of the premises for doctors/staff parking.
- Install baby changing facility.
- Practice Premise and refurbishment
- Carry out further Patient Surveys to learn more about patient experiences Friends and Family Test.



4. PPG 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?