

Annex D: Standard Reporting Template

Wessex Area Team 2014/15 Patient Participation Enhanced Service – Reporting Template

Practice Name: Gosport Medical Centre

Practice Code: J82006

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: 30 | | | | | | | | | | | |
| Detail the gender mix of practice population and PPG: | | | | | Detail of age mix of practice population and PPG: | | | | | | |
| % | Male | Female | | | | | | | | | |
| Practice | 47.32 | 52.68 | % | <16 | 17-24 | 25-34 | 35-44 | 45-54 | 55-64 | 65-74 | > 75 |
| PRG | 33.34 | 66.66 | Practice | 19.81 | 11.88 | 11.30 | 12.38 | 14.88 | 12.49 | 9.95 | 7.55 |
| | | | PRG | 0 | 3.34 | 3.34 | 6.67 | 3.34 | 26.67 | 33.34 | 23.34 |

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 | 92.46 | 0.29 | 0 | 5.35 | 0.05 | 0.06 | 0.55 | 0.07 |
| PRG | 96.67 | 0 | 0 | 3.33 | 0 | 0 | 0 | 0 |

| | Asian/Asian British | | | | | Black/African/Caribbean/Black British | | | Other | |
|----------|---------------------|-----------|-------------|---------|-------------|---------------------------------------|-----------|-------------|-------|-----------|
| | Indian | Pakistani | Bangladeshi | Chinese | Other Asian | African | Caribbean | Other Black | Arab | Any other |
| Practice | 0.48 | 0.04 | 0.07 | 0.09 | 0.25 | 0.03 | 0.11 | 0.10 | 0 | 0.20 |
| PRG | 0 | 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:

Our PPG consists of 'actual' and 'virtual' members. All receive emails and minutes from the surgery but the 'actual' members attend meetings and are more actively involved in discussions. All are encouraged to comment on suggestions arising from the surveys. Active recruitment by receptionists, the clinical team and existing PPG members who are all completely aware of the importance of diversity within the group to represent all patients. We have information available on our website, leaflets in the reception area and in consulting rooms and we have also enclosed flyers with patient letters explaining the role of our PPG. We also plan to enclose information about the PPG in our new patient packs giving new patients an opportunity to join our group.

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? **NO**

If you have answered yes, please outline measures taken to include those specific groups and whether those measures were successful:

N/A

2. Review of patient feedback

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

We ran 3 surveys between September 2014 and January 2015 covering 3 different topics as agreed with the PPG.

- The surveys were available on line and in reception, posted with patient letters where appropriate and given to patients by clinical staff after consultations.*
- Members of our PPG distributed surveys in the waiting room, helped patients complete the surveys and offered information and advice.*

How frequently were these reviewed with the PRG?

We held 4 meetings throughout the year with members of the PRG where the surveys were discussed and planned and followed up with another meeting to discuss the findings and actions arising from the completed surveys.

3. Action plan priority areas and implementation

Priority area 1

Description of priority area: IT AWARENESS

There was concern among the PPG that there was an underutilisation of the electronic systems available to patients to aid appointment and prescription management.

The plan was to inform and encourage patients to use our systems to improve patient experience and improve efficiency for both patient and practice.

What actions were taken to address the priority?

- *A survey was devised with input from the PPG. The short questionnaire asked patients if they were aware of the electronic systems available for appointment and prescription management and if they were happy and able to use them.*
- *An information leaflet was attached to the questionnaire explaining how to access the systems and members of the PPG were available in the reception area to encourage and help patients sign up.*
- *Information was also advertised on the website and in patient newsletters.*
- *A patient contact form was also included to ensure we had correct details for patients wishing to sign up.*

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

- *There has been an increase in patients using our online appointment booking and prescription ordering services. This survey coincided with the roll out of EPS which has also shown a steady increase in patient's participation. We now have a total of 2245 patients using Vision on Line (25% of our patients up from 10% in June 2014). 10% more patients have signed*

up to our SMS text reminder service since October 2014. 14.5% of surveyed patients showed an interest in registering for all electronic services.

- There was an increased awareness of our systems and although not all patients wanted to use them we feel this was a very positive exercise. Many patients will still choose to use more comfortable means to them of booking appointments and organising repeat prescriptions (usually through a receptionist)*
- Following this survey we decided to ensure that all new patients are given written information on all systems available and instructions on how to access them.*
- Instructions on how to sign up to the electronic systems are now also on the website and information is on display in reception.*

The results of this survey are available to view on our website and we have a hard copy available in reception.

Priority area 2

Description of priority area: APPROPRIATE USE OF APPOINTMENTS

The PPG raised a concern that some of our patients did not understand or use triage, emergency and routine appointments

appropriately. This undoubtedly led to inefficiencies and frustration in the appointment system and available resources.

What actions were taken to address the priority?

- The PPG devised a survey questionnaire asking patients what they understood of triage, emergency and routine appointments and who should attend these appointments. An information leaflet was attached to inform patients and members of the PPG were available to explain and clarify the differences.*
- The PPG were especially useful in the waiting room in the mornings during our triage clinic where they were able to explain the triage system to our patients.*

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

- Although a high percentage of patients understood the definition of 'triage' 'emergency' and 'routine' they were also attending inappropriately. Reviewing comments on the surveys and listening to PPG feedback it was clear that patients will attend according to their symptoms and to the clinic that suited them best, perhaps not what the clinicians would consider appropriate.*
- It was recognised that inappropriate use of triage appointments is often due to patients being unable to book routine appointments.*
- This survey was therefore essentially an opportunity and exercise to educate patients in attending the appropriate appointment. Patients were willing to discuss why they had chosen to attend a particular clinic and the problems they had encountered. Patients were willing to receive information and we devised our own Choose Well information leaflet*
- Copy of Choose well information was added to the practice booklet*
- Choose Well leaflets are now sent out with patient letters and made available in reception and triage for patients who*

attended inappropriate appointments.

- *Choose well leaflets added to new patient packs*
- *Patients frequently voiced concerns about the long wait in triage and had many suggestions that included more clinicians and/or booked appointments.*
- *After discussion it was decided to consider the feasibility of reorganising of the second half of the triage clinic. Patients who telephoned to ask to be seen urgently (if appropriate) would be asked to come down at a more specific time after 10.00am. This would prevent a crowded waiting room and long delays for patients at the end of the triage clinic. It would also take the pressure of the triage team as they would be more able to pace themselves through the morning.*
- *The practice has also decided to separate 'triage nurse' and 'triage doctor' appointments. Once booked in the nurse will see patients who only need to see a nurse. We hope this will help the 'wait' and also enable us to understand the mix of patients that attend triage. The PPG were supportive of this 'pilot' and it would be discussed at the next meeting in April.*

The results of the survey are available to view on our website and we have a hard copy available in reception.

Priority area 3

Description of priority area: ATTENDANCE

As always the PPG are concerned about the number of 'DNA' appointments. This has been a frequent discussion point in PPG meetings throughout the year. The percentage of DNA's run at 10% for GP appointments and 9% for nurse appointments. Despite previous attempts to improve attendance rates nothing has changed.

What actions were taken to address the priority?

- *A patient survey was devised to find out if our patients understand the impact of DNA's on both the surgery and other patients.*
- *We also asked if patients know the various ways in which they can cancel appointments.*
- *We included an information leaflet listing the various methods of managing appointments for patients to take away with them.*

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

- *75% of patients questioned were surprised at our DNA rate*
- *96% of patients questioned said they knew how to cancel appointments.*
- *Patients when asked for a solution could not offer a viable one*

- *Our DNA's have not reduced. However we will continue to make reducing DNAs a priority due to reducing capacity. Rising patient numbers and fewer GP appointments available put an ever increasing pressure on the system.*
- *We will have a concerted effort to display DNA rates along with information on the ways to cancel appointments. Information leaflets will be made available throughout the surgery and sent in patient letters if appropriate and added to the new patient pack.*

The results of the survey are available to view on our website and we have a hard copy available in reception.

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):

- Our PPG is growing from strength to strength. The 'actual' members are proactive in helping us to tackle ongoing issues.
- We have regular representation at the Gosport Locality Patient Group
- The number of patient surveys distributed and completed has increased over previous years due to the involvement of the PPG
- DNA letters have been reworded with help and advice from the PPG
- Waiting room seating has been reorganised and improved with help from the PPG
- Waiting times are now displayed in the waiting room for patient information
- Children in triage are assessed quickly and with priority over adults
- The group has acknowledged and discussed changing needs of patients in the context of a changing world

4. PPG Sign Off

Report signed off by PPG: YES/NO

Date of sign off:

How has the practice engaged with the PPG:

- Regular face to face meetings.
- Regular email contact
- The practice is supportive of the PPG views
- The practice has actioned ideas and suggestions from the group

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

- Surveys have been distributed at mother and baby clinics
- All range of patients have been targeted during the triage clinic and asked to complete the surveys

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

The practice has received feedback from:

- Waiting room surveys
- On line surveys
- Patient suggestions and comments

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

- Meetings with the PPG were held before the roll out of each survey
- The surveys were discussed and designed with input from the PPG
- Results discussed with the PPG and meetings
- Actions and changes agreed with the PPG

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

- PPG have raised awareness of patient needs
- New triage management implemented
- More patient information available and from many sources

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

The PPG feel that they have been welcomed in to the practice and are listened to. The group itself feels cohesive and has worked well together this year. The group is focussed and is pleased that it has been able to manage areas of development.

The group feels privileged to represent the patients of Gosport Medical Centre and are proud of this year's achievements.