

**West Yorkshire Area Team**  
**2014/15 Patient Participation Enhanced Service – Reporting Template**

Practice Name: Dr Singh & Partners (Church View Health Centre)

Practice Code: B87006

Signed on behalf of practice: Jill Taylor, Practice Manager Date: 19<sup>th</sup> March 2015

Signed on behalf of PPG: Mrs Betty Ann Crane Date: 20<sup>th</sup> March 2015

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

**Does the Practice have a PPG?**

The practice has had a Patient Participation Group since 2008, which is still active. New members were recruited in July 2014. The practice is affiliated to NAPP (The National Association for Patient Participation) the body that oversees and advises Patient Participation Groups.

**Method of engagement with PPG:**

The Patient Participation Group meets face-to-face on a quarterly basis. The meeting is chaired by Jill Taylor, Practice Manager following agreement in a meeting held on 7<sup>th</sup> April 2014. At this meeting it was also agreed to hold the meetings on an alternate basis between a 1pm and 6pm start to ensure all participants have the opportunity to attend the most meetings. It was agreed that Monday is the best day to have the meeting. The meetings are held in the Community Room at Church View Health Centre.

In the 2014/15 period, meetings were held on 7<sup>th</sup> April 2014, 28<sup>th</sup> July 2014, 6<sup>th</sup> October 2014, 1<sup>st</sup> December 2014 and 2<sup>nd</sup> March 2015. Minutes are available for all these meetings.



**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:**

It was acknowledged in our meeting on 7<sup>th</sup> April 2014 that the PPG was not representative of the practice population and some younger members in the 20 & 30 age categories would make the group more balanced. The practice decided to target some younger patients by advertising in the surgery on the information board, on its website and via the in-house Midwife Clinic and Childhood Immunisation Clinic.

To-date there has not been any volunteers from this cohort but the recruitment campaign will continue in surgery and on its website.

The PPG has two representatives from the Disabled Peoples Partnership (South East Wakefield).

**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:**

Engage with care homes and carers of patients with dementia to ensure their views are heard and responded to positively. The practice, as outlined in its Action Plan, has chosen dementia as one of its health priorities. The aim is to improve the care and support for people with dementia and their families and carers by ensuring all staff have undertaken dementia friendly training and the practices are dementia friendly environments. The practice is delighted that two PPG members have volunteered to engage with this initiative.

## 2. Review of patient feedback

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

#### **Patient Survey:**

In the 28<sup>th</sup> July 2014 meeting, it was discussed that there was no longer a requirement in the Patient Participation Enhanced Service to undertake a local patient survey. However, it was felt for good practice and to establish a year-on-year comparative that the patient survey should be undertaken. This was undertaken for a 2-week period commencing 17<sup>th</sup> November before the commencement of the mandatory Friends and Family test so as not to bombard patients with too many surveys.

The previous year's survey was distributed and discussed by the PPG and it was decided at the 6<sup>th</sup> October 2014 meeting to choose 10 key questions for this year's survey.

#### **Friends and Family Test:**

In the 28<sup>th</sup> July 2014 meeting, it was discussed that a mandatory Friends and Family Test would commence in December 2014.

It is agreed that patient feedback is seen as an essential component of practice development, clinical quality and governance and staff training and appraisal. Going forward the PPG Meetings will be a forum to discuss NHS Choices Website feedback and responses, any comments received in the Comment Box and any Care Quality Commission Inspection Reports. All members of the PPG have expressed a willingness to participate in a CQC Inspection when the practice is informed of this.

In addition to the feedback outlined, the PPG meetings are a platform to advise the group of practice changes, CQC Inspections and Intelligence Monitoring Reports and NHS initiatives, e.g., New Requirements in the GP Contract (Named GP for Patients Over 75, Improving Patient On-Line Access to Services, Friends & Family Test, Choice of GP Practice, etc.)

### **How frequently were these reviewed with the PRG?**

**Patient Survey:** Preliminary results of the Patient Survey were collated and discussed at the meeting held on 1<sup>st</sup> December 2014 and a comparative to the previous year was discussed at the 2<sup>nd</sup> March 2015 meeting. Examples of responses from the survey

were:

- Last year 38% reported that it was easy getting through on the phone and this year's response was 49%.
- Last year 74% said they were able to see a doctor on the same day or in the next two days that the surgery was open and this year's response was 77%.
- Last year 46% of patients said it was very easy to get an appointment with a nurse and this year's response was 49%.
- Last year 79% of patients said that the receptionists were very friendly and this year's response was 81%.

**Friends & Family Test:** The results from December, January and February were presented and discussed at the meeting on 2<sup>nd</sup> March 2015.

	<b>DECEMBER</b>	<b>JANUARY</b>	<b>FEBRUARY</b>
<b>Extremely Likely</b>	72%	73%	74%
<b>Likely</b>	24%	21%	21%
<b>Neither Likely or Unlikely</b>	1%	1%	0%
<b>Unlikely</b>	1%	1%	0%
<b>Extremely Unlikely</b>	1%	1%	0%
<b>Don't Know</b>	1%	3%	5%

Each month the results are being displayed in the practice and reported back to NHS England as per the mandatory requirement.

Both the PPG members and the practice are pleased with the results, especially some of the written comments to a secondary question which asks the main reason for the rating given. It was felt the results and comments were very positive about the staff and services provided by the practice.

### 3. Action plan priority areas and implementation

#### Priority area 1

##### Description of priority area:

**Monitoring the number of patients who do not attend appointments (DNAs) and promoting the text reminder service.**

##### What actions were taken to address the priority?

- Collating monthly statistics of missed appointment for all doctors and nurses and discussing with PPG.
- Displaying in the surgery each month the amount of appointments missed and the hours of lost clinical time and how this impacts on the surgery.
- Encouraging patients to cancel appointments that are not needed.
- Enabling on-line functionality to cancel appointments via the website.
- Promoting the use of the text reminder service and attempting to sign patients up to this when they attend the surgery.

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

- The practice has not seen a significant reduction in DNAs which it had hoped for. However, it continues to publicise DNA statistics and promote the text messaging service via posters, LCD Information Screen and Website.
- The practice is also currently promoting the new functionality of booking and cancelling appointments on-line via its website. It is hoped that patients will utilise the cancelling of appointments on-line as a more convenient way to manage their appointments if they cannot contact the surgery via phone during busy times.

## Priority area 2

### Description of priority area:

**More effective utilisation of the Community Room for patient educational events and workshops.**

### What actions were taken to address the priority?

It was identified that the Community Room adjacent to the waiting room was a little exposed with its glass walls. It was agreed that fitting blinds would rectify this problem and make the room more confidential for patient education activities. The practice was very grateful that a member of the PPG offered to pay for this and blinds have now been fitted.

Following discussions in PPG meetings, the Practice Manager approached the course organiser of the Expert Patient Programme to run their self-management course for patients and Rightsteps to organise some educational workshops.

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

- The blinds were fitted and the room is now confidential for use as a patient education room.
- Two workshops have been organised by Rightsteps.

Tuesday, 10<sup>th</sup> March at 6pm to 7.30pm: Sleep

Tuesday, 17<sup>th</sup> March at 1pm to 2.30pm: Improving Stress & Wellbeing

- The first 6-week Expert Patient Programme will commence on Tuesday, 16<sup>th</sup> June until 21<sup>st</sup> July from 10.30am to 1pm. The practice is currently advertising the programme in the surgery and within consultations to recruit a cohort of patients.

Going forward the PPG will discuss other workshops and activities which the practice can host to utilise the Community Room more effectively for patient engagement and education.

### Priority area 3

#### **Description of priority area:**

##### **Establishing a dementia-friendly practice.**

The practice has chosen dementia as one of its health priorities within its Locality Network with surrounding practices. The PPG were keen to be involved with this initiative. The aim is to improve the care and support for people with dementia and their families and carers by ensuring all staff have undertaken dementia-friendly training and the practice is a dementia-friendly environment. Two members of the PPG have volunteered to work with the practice to train to be dementia-friendly and assist with an assessment tool to ensure the practice is a dementia-friendly environment.

The PPG is also assisting the practice to review questions which will be used by Public Health when out in the community to ascertain if there are any barriers to patients seeking help with dementia and what they already know about the services available.

#### **What actions were taken to address the priority?**

- All clinicians (doctor and nurses) at the surgery undertook Dementia Friendly training on 18<sup>th</sup> March 2015.
- All administrative staff at the surgery to undertake Dementia Friendly training by September 2015. This will include the training of two volunteer PPG members.
- The practice will undertake The King's Fund 'Is Your Health Centre Dementia Friendly' Assessment Tool. This will be undertaken with the Practice Manager, two volunteers from the PPG and the King's Fund. This will be completed by September 2015.
- The practice from April 2015 is commencing a health check and flu immunisation programme for carers of people with dementia to reduce the risk of crisis intervention.
- Identify a Dementia Champion.



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

- The practice is advertising this initiative within the surgery and will advise patients of its progress through its website and on the LCD Information Screen in the waiting room.
- The Practice Manager will liaise with the two PPG volunteers about training and arranging the King's Fund Assessment Tool.
- The practice will be contacting carers of dementia patients to offer the health check and flu immunisation.

**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):**

**Following the 2013/14 survey the following Action Plan was agreed:**

1. **Promotion of Current Services:** The 2013/14 survey revealed that 58% of patients were unaware that the practice hosted additional services at the surgery such as ultrasound, audiology and physiotherapy. The practice has been promoting all its services via the surgery LCD screen.
2. **Patient Confidentiality:** The 2013/14 survey revealed that 21% of patients were not happy about being overheard when at the Reception Desk. The practice immediately put signs on reception advising patients that if they wished to have a discussion in a more confidential setting then they can request to use the Interview Room adjacent to the Reception Desk. The 2014/15 survey revealed that there has been a reduction to 13% of patients you are not happy about being overheard. The practice will continue to address this issue.
3. **Opening Times:** The 2013/14 survey revealed that not all patients were aware of the practice's two late night surgeries from 6.30pm to 9pm. The practice continues to promote this in surgery and on its website.

#### 4. PPG Sign Off

Report signed off by PPG: YES by Mrs Betty Ann Crane (Mrs Crane is happy for her name to be included on this report).

Date of sign off: 19<sup>th</sup> March 2015.

**How has the practice engaged with the PPG:**

The practice holds quarterly meetings with the PPG.

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

The practice with agreement of the PPG ran a publicity campaign to attract a younger cohort of patient and this ongoing. As a group, we have chosen to participate in the health priority dementia which is an on-going objective and the practice will be liaising with carers groups.

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

We have run the Annual Survey (November 2014) and commenced the Friend and Family Test in December. All results have been reviewed by the PPG in meetings.

**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?**

The action plan is ongoing and will be continually monitored on its progress.

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

I feel I am involved and have an opportunity to ask questions and express my views.

