

## Patient Participation Reporting Template 2014-2015

Practices are required to submit the patient participation report detailed below.

Please submit an electronic version of this report to [england.bgswareateamprimarycareBewley@nhs.net](mailto:england.bgswareateamprimarycareBewley@nhs.net) by 17<sup>th</sup> April 2015

If you have any queries, please contact Joy.Weeks – [england.bgswareateamprimarycareBewley@nhs.net](mailto:england.bgswareateamprimarycareBewley@nhs.net)

Practice details: Patford House Partnership

Practice code: J83050

**Stage one – validate that the patient group is representative**

Demonstrates that the PRG is representative by providing information on the practice profile:

<b>Does the Practice have a PPG YES/NO</b>	<b>YES</b>
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Practice population profile	PRG profile	Difference
<b>Age</b>		
% 18 – 24 – 7.3	% 18 – 24 -	-7.3
% 25 – 34 – 7.4	% 25 – 34 -	-7.4

Practice population profile	PRG profile	Difference
% 35 – 44 – 12.5	% 35 – 44 -	-12.5
% 45 – 54 – 18	% 45 – 54 – 44	26
% 55 – 64 – 13.4	% 55 – 64 -	-13.4
%65 – 74 -10.7	%65 – 74 - 22	11.3
%75 – 84 -5.3	%75 – 84 – 33	27.7
% Over 85 -2	% Over 85 -	-2
Ethnicity		
White	White	
% British Group - 95	% British Group - 100	-5
% Irish – 0.3	% Irish - 0	-0.3
Mixed	Mixed	
% White & Black Caribbean – 0.1	% White & Black Caribbean - 0	-0.1
% White & Black African – 0.1	% White & Black African - 0	-0.1

Practice population profile	PRG profile	Difference
% White & Asian – 0.3	% White & Asian - 0	-0.3
<b>Asian or Asian British</b>	<b>Asian or Asian British</b>	
% Indian – 0.2	<b>% Indian – 0</b>	<b>-0.2</b>
% Pakistani - 0	% Pakistani – 0	0
% Bangladeshi - 0	% Bangladeshi – 0	0
<b>Black or Black British</b>	<b>Black or Black British</b>	
% Caribbean – 0	% Caribbean – 0	0
% African – 0.1	% African - 0	-0.1
<b>Chinese or other ethnic Group</b>	<b>Chinese or other ethnic Group</b>	
% Chinese – 0.2	% Chinese - 0	-0.2
& Any Other – 0.1	& Any Other - 0	-0.1
<b>Gender</b>		
% Male - 48	% Male - 89	41

Practice population profile	PRG profile	Difference
% Female - 52	% Female - 11	-41

<p><b>Differences between the practice population and members of the PRG</b> 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:</p>	
<p><b>Are there any specific characteristics of your practice population which means that other groups should be included in the PPG? Eg a large student population, significant number of Jobseekers, large numbers of nursing homes, or a LGBT community</b></p> <p>YES <input type="radio"/>      <b>NO</b> <input checked="" type="radio"/></p>	<p><b>If you have answered YES, please outline measures taken to include these specific groups and whether those measures were successful:</b></p>
<p><b>Is the group virtual or face-to-face?</b></p>	<p>Face to face</p>
<p><b>How many members are there on the PRG?</b></p>	<p>9</p>

<b>Step 2 – Review Patient Feedback</b>	
Outline the sources of feedback that were reviewed during the year:	Direct patient feedback Suggestion box in reception Compliments – what works well Complaints – what isn't working so well Discussion with patients in waiting areas Carers Clinics FFT NHS Choices Patient Survey Website contact
How Frequently were these reviewed with your PRG	Quarterly

Priority Area 1	
Describe the priority area:	Appointment Access
Why was this priority identified:	Patient survey feedback and comments from patient regarding length of wait for appointments.
What actions were taken to address this priority	<p>In April 2013, we employed an Advanced Nurse Practitioner who could see and treat minor illness and any other on the day problems. In addition, she was a qualified COPD nurse which meant GP appointments were not needed for these reviews.</p> <p>We increased the number of telephone slots with both the GP's and ANP.</p> <p>Receptionists were trained in directing patients to the correct clinician whether that be a GP or ANP.</p> <p>DNA appointments are calculated and published monthly.</p> <p>Early bird appointments extended to double the number of early morning appointments offered.</p>
What were the results of the actions and what impact on patients and carers.	<p>Patients were seen on the day with minor illnesses rather than having to wait for a GP appointment.</p> <p>This improved patient access to GP's particularly for complex/long term conditions.</p> <p>The telephone appointments have proved popular with all patients.</p>

	<p>This has gradually improved appointment access over the past 18 months</p> <p>This year's patient survey has indicated that patient satisfaction with the waiting time for both urgent and routine appointments has improved.</p>
How was this publicised.	This was publicised to patients through the website and flyers

<b>Priority Area 2</b>	
Describe the priority area:	Parking
Why was this priority identified:	<p>The priority was identified through numerous complaints and the patient survey.</p> <p>We only have four allotted parking places for the GP's. All other parking spaces are public and limited in number.</p> <p>The congestion caused some local residents to take their own action and approached the town council for double yellow lines to be introduced in Patford Street.</p>
What actions were taken to address this priority	<p>The staff at Patford were asked to park away from the surgery.</p> <p>We publicised this issue on the website asking patient to consider not bringing their cars onto Patford Street and to use public transport wherever possible.</p> <p>Double yellow lines were painted in February 2015.</p> <p>To compound the problem, Green Square (Maintenance of local housing association properties) have been renovating The Wharf with large numbers of vans occupying spaces otherwise available for patients. Practice Manager has been in discussion with Green</p>

	Square to see what other options exist for Green Square parking.
What were the results of the actions and what impact on patients and carers.	<p>Parking is a major issue for Patford but is beyond our control apart from what we have implemented.</p> <p>The changes in parking have meant that access for emergency vehicles has improved. Green Square are looking into alternative parking for their vans.</p>
How was this publicised.	We publicised this in the surgery and on the website.

<b>Priority Area 3</b>	
Describe the priority area:	Supporting carers
Why was this priority identified:	Feedback from patients and staff regarding the large number of people who spend a significant amount of time caring for friends and relatives. This growing group of patients have specific needs and their health and wellbeing is often overlooked whilst their actions are essential to the health and wellbeing of those they care for.
What actions were taken to address this priority	<p>Carers were identified by promotion in reception, via our website, through our clinicians and for new patients on registration questionnaire.</p> <p>Existing patients were contacted to ensure our Carer's Register was as up to date as possible so that we could target our activities towards those who would benefit most.</p>



	<p>We have regular Carer's Clinics at both our sites where carers are invited to attend a double appointment for a health check and full assessment of their needs. Support can be offered or carers can be signposted to more specialist support where necessary. Prescription breaks can be offered to those who are struggling.</p> <p>Carers can be put in touch with our Care Coordinator if appropriate who can assess any further needs both of the carer and the person they care for.</p>
<p>What were the results of the actions and what impact on patients and carers.</p>	<p>We have worked closely with Wiltshire Carers regarding best practice in identifying and supporting carers. This has resulted in the surgery being awarded 'Gold Plus' status (promoted from Gold the previous year).</p> <p>Increased regular contact with carers and encouraging new carers to engage with the surgery.</p>
<p>How was this publicised.</p>	<p>Waiting rooms, website, reception,</p>

Progress on previous years
If you have participated in this scheme for more than one year, outline progress made on the issues raised in the previous year (s)
<p>Year 1 (2011-2012)</p> <ul style="list-style-type: none"> <li>• Patients were unhappy with our phone system; however, our on-going contract did not expire until 2013. We shortened the greeting message and simplified the options menu.</li> <li>• Routine appointment availability – we publicised DNA's, tried to educate patients regarding self-management of minor illnesses.</li> <li>• Prescriptions – negative survey feedback made about time taken to process a repeat prescription. Patient Education</li> <li>• Patient communication – gathering of patient email addresses to facilitate communication such as newsletters, clinics etc</li> <li>• Patient privacy at reception – offered a 'speak privately' area for patients who were concerned that others could overhear conversations with reception staff.</li> </ul> <p>Year 2 (2012-2013)</p> <ul style="list-style-type: none"> <li>• Appointment access – recruitment of an additional salaried GP at PHS.</li> <li>• Telephone system – discussion commenced with potential new providers.</li> <li>• The surgery started to use Facebook and Twitter to try to improve engagement with our younger patient population</li> </ul> <p>Year 3 (2013-4)</p> <ul style="list-style-type: none"> <li>• Appointment access – recruitment of Advanced Nurse Practitioner to ease pressure on GP appointments. Early bird surgeries extended in 2014 offering double the previous number of early bird appointments.</li> <li>• In March 2014 we changed our telephone provider. The new contract enables patients to ring a local rate number and amended the caller's options to three, simplifying and shortening the wait time. Our most recent survey has demonstrated a huge increase in patient satisfaction with our phone system.</li> <li>• Prescriptions – a new online system was introduced enabling patients to pick from a list of their repeat medications and request these online. This simplified the repeat prescription process for both patients and the surgery.</li> </ul>

<b>PPG Sign Off</b>	
Has the report been signed off by the PPG	Yes – Howard Marshall
What date was this report signed off:	16.4.15

<b>How has the practice engaged with the PPG</b>
<p>How has the practice made efforts to engage with seldom heard groups in the practice population?</p> <p>Communication by Facebook, twitter to appeal to the younger generation of the practice population.            Website updated weekly as well as the traditional posters and displays in the surgery waiting rooms.            Carers – We have had regular meetings at both Patford House and Sutton Benger throughout the past twelve months.            Care Homes – Improved communication with the nursing home management and attended regular care home meetings. Regular ward rounds.</p>
<p>Has the practice received patient and carer feedback from a variety of sources</p> <p>Yes – through the patient survey, the friends and family test, website feedback, suggestion box, face to face, telephone, nhs choices.</p>

How was the PPG involved the agreement of the priority areas and the resulting action plan?

The priority areas evolved during the past 12 months as a result of previous survey feedback and progress was discussed at each PPG meeting.

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

- Improved access to appointments for all clinicians
- We have achieved Gold Plus for Carers
- Improved patient awareness of parking problems at the surgery
- Continuity of Care improved by freeing up GP appointments for those who have long term conditions while minor illness can be seen on the day by our Minor Illness Nurse.

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

The PPG will be a key partner in developing services going forward. We would like to thank all our PPG members for their support over the past year.

**Name of Individual Completing this Document: Helen Strevens/Anna Rushowski**

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