

Patient Participation DES Reporting Template

Taken from; GMS Contract 2014/15, Guidance and Audit requirements, NHS England Gateway reference: 01347

East Anglia Area Team
2014/15 Patient Participation Enhanced Service Reporting Template

Practice Name: STOWHEALTH

Practice Code: D83044

Signed on behalf of practice: Paul Brown Date: 31st March 2015

Signed on behalf of PPG/PRG: I Leedham, N Rozier & L Harris Date: 31st March 2015

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

Does the Practice have a PPG? YES / NO	Yes
Method of engagement with PPG: Face to face, Email, Other (please specify)	Face to Face and Email
Number of members of PPG:	17 (patient list size 17891)

Detail the gender mix of practice population and PPG:			Detail of age mix of practice population and PPG:								
%	Male	Female	%	<16	17-24	25-34	35-44	45-54	55-64	65-74	>75
Practice	47% (8)	53% (9)	Practice	5.1%	8.5%	13.3%	13.3%	13.9%	11.5%	10.3%	9.5%
PPG	47% (8)	53% (9)	PPG	0%	0%	5.9%	17.6%	5.9%	29.4%	35.3%	5.9%

Detail the ethnic background of your practice population and PPG:

	White				Mixed/ multiple ethnic groups			
	British	Irish	Gypsy or Irish traveller	Other White	White & Black Caribbean	White & Black African	White & Asian	Other mixed
Practice	94.7%	-	-	3.6%	0.1%	-	-	0.2%
PPG	94.1%	-	-	5.9%	-	-	-	-

	Asian/ Asian British					Black/African/Caribbean/Black British			Other	
	Indian	Pakistani	Bangladeshi	Chinese	Other Asian	African	Caribbean	Other Black	Arab	Any Other
Practice	-	-	-	0.4	0.3	0.2	-	-	-	-
PPG	-	-	-	-	-	-	-	-	-	-

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:

In 2014/15 the practice have continued to advertise participation on the PRG. These methods include:

- Advert posted on practice website and the plasma/Jayex screen in waiting area
- Use of Website and Twitter account to advertise feedback from patients.
- GPs were encouraged to invite patients personally to join the PRG.
- Members of the PRG recruited patients who fitted the profile of the practice.
- Asking new patients at the point of them registering at the practice.

We have two new members join the PRG replacing two members who have stood down. This has allowed us to better represent people of working age and those with young families.

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 (Lesbian Gay Bisexual Transgender) 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:

- NHS Choices and GP Patient Survey data have been shared and discussed with PRG at the October meeting
- The practice reviews complaints and compliments regularly with all staff and any themes reported to the PRG as agenda items.
- Feedback about the appointment system and the introduction of skill mix clinicians supporting the GP clinical team has been shared.
- The Friends and Family Test was discussed with the PRG at the February meeting.

How frequently were these reviewed with the PPG?

The group meets three times a year and contact is made regularly by email and/or phone.

Action plan priority areas and implementation

Priority area 1

Description of priority area: **Physical Access to the building**

Pedestrian and vehicle access to the building is an ongoing issue affecting the quality of service offered to patients and other building users.

What actions were taken to address the priority?

A letter from Stowmarket Council has been sent indicating that following a meeting with the Stowmarket Town Council Operations and Service Committee a fence will be erected on the boundary of the cemetery and Stowhealth. This letter was sent to all Patient Reference Group meetings ahead of the meeting.

DH (A PRG member) has been very active in trying to highlight the dangers of this decision based on the difficulties of crossing Violet Hill Road without access to the cemetery. DH will continue to pursue this and the group are grateful for all of her efforts so far.

DH confirmed she had taken the bus around Stowmarket. Although it ran to time, the times were impractical and patients did not appear to use the bus stop outside Stowhealth. This has been fed back to the council.

The practice obtained capital funding to improve physical access in line with disability and discriminatory act compliance. With PRG guidance a total of £5000 was spent on improving access to GP services by:

- (i) Installing evacuation chairs in stair well
- (ii) Lowering part of the reception desk for wheelchair users
- (iii) Providing all clinical rooms with electric couches

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

The present option under consultation with the other landlord and other building users is installation of two ticket machines on site. Parking for the first hour will be free with escalating charges of up to £8.00 for car parking for the whole day. The car park will be policed by a warden regularly at first and then more intermittently as time goes on. The PRG felt that all other options had been explored and the practice was upholding the principle of free parking for clinical appointments.

This is positive for patients who will see improved car parking availability as more staff park at the Football Club located 7 minutes walk. However, we are aware of problems arising with Chilton Primary school and especially football ground car parking as no official contract for use exists. There is a patient/public consultation period happening over the next two months.

Priority area 2

Description of priority area: **Improve patient information and self led care**

What actions were taken to address the priority?

Dr Louise Skioldebrand is supporting the community memory assessment service. A consultant-led clinic is run twice a month to offer screening and early intervention. Jean Richardson, Dementia Advisor from Suffolk Age UK has offered her help and expertise to support patients in order to access relevant services for patients. Patients (or relatives) who may benefit from this sort of support would be contacted to see if they would like to access any additional help.

Changes have been made to the practice website to make patient information and online services easier to access. This was in direct response to feedback from PRG members who reviewed the information we had displayed on our website.

A practice newsletter has been sent out to 3000 patients home address and posted in the local magazine.

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

- A project that encouraged self-led care in relation to hypertension and was based around self-led medication dosing. It was agreed by the PRG this was not a project for everybody but a small group of patients may find this an ideal way of managing their hypertension – particularly those who find visiting the doctors stressful. This is being promoted by Drs to their patients as appropriate.
- The charity, united response, held a dementia event recently at the East Anglian Museum in Stowmarket which comprised of workshops and activities. It was well supported with almost 100 patients and carers plus Drs from Stowhealth attending. There are plans for a further event in October 2015 in association with Stowhealth.

Priority area 3

Description of priority area: **Engage with Healthwatch Suffolk**

A Recent Healthwatch Suffolk report generated a negative image of primary care in

Suffolk. However, this was in contrast to a recent national GP review which showed a better than national standard in Suffolk. Healthwatch is keen to become more involved in Patient Reference Groups which we fully support.

What actions were taken to address the priority?

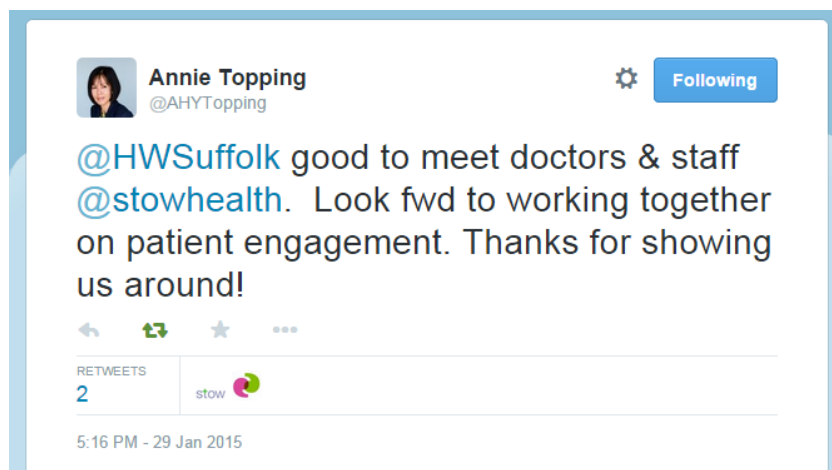
(i) Members of the PRG said they would be happy to speak with patients informally in the waiting room to generate some balanced feedback with Healthwatch support.

(ii) PB to approach PRGs from other local practices and to organise a locality meeting to share information and issues. It was thought that it would be advisable not to have Healthwatch present at this meeting.

(iii) PB continues to work with Healthwatch to generate dashboard of feedback about the practice. It would be very useful to bring feedback from a number of local and national sources to gather service user views.

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

A number of meetings have taken place with Healthwatch Suffolk and plans are in place to work more closely on a number of initiatives to improve patient engagement and experience.



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):

Improving customer services and "Hello, my name is...". 97% of patients in the recent National GP survey covering the period 2013/14 reported that they felt the reception team was helpful. Goal achieved.

Improvements in the waiting room for patients have been completed with the installation of ceiling mounted air conditioning units in 2013/14. This was recommended by patients as a high priority improvement to the service we offered.

Signposting and way finding in the building has been improved with the installation of clearer signage. In addition the patient island area of the waiting room has improved with more patient leaflets being made accessible and better seating.

More effective signposting to promote self-care and development of condition-based guides to sign post patients to helpful organisations and support groups.

Self-care is promoted in the waiting room on the plasma screen although members of the PRG commented that the screen changes too quickly. It was thought that noticeboards displaying local group information would be much more helpful than leaflets sitting on desks. Having a targeted approach to patient information e.g. using national disease awareness days to display national and local guidelines was also deemed useful. This is an on-going objective.

Persevering with access issues and car park space is an on-going priority for the practice. An agreeable outcome had not been achieved in 2013/14 but the PRG felt that all efforts had been made.

3. PPG Sign Off

Report signed off by PPG: YES (email signoff confirmations received by members I Leedham, N Rozier, L Harris)

Date of sign off: 31st March 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?

I can confirm that I have read the attached report and would 'sign it off' as accurate. My only comments are minor:

I never actually saw any feedback forms on the occasions when I was waiting as a patient, though saw results from them.

On a number of occasions I have had to wait for long periods in the waiting room that would have imposed worry had I arrived by car with an hour's limit on parking. I generally walk to the surgery except in rain.

(Lawrence Harris)

I've read through the attached summary and in my opinion it is a fair reflection of the PPG activities.

Kind regards,

Ian Leedham