The Guildhall & Barrow Surgery

2014/15 Patient Participation Enhanced Service

Practice Name: The Guildhall & Barrow Surgery

Practice Code: D83013

Signed on behalf of practice: Date: 30th March 2015

Signed on behalf of PPG: Action Plan agreed by PRG via email Date: 30thMarch 2015

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

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| Does the Practice have a PPG? *Yes* | |
| Method of engagement with PPG: Virtual - via email | |
| Number of members of PPG: *50* | |
| Detail the gender mix of practice population and PPG:   |  |  |  | | --- | --- | --- | | % | Male | Female | | Practice | 49 | 51 | | 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 | 14 | 7 | 12 | 13 | 16 | 12 | 14 | 12 | | PRG | 0 | 6 | 12 | 8 | 18 | 16 | 32 | 8 | |
| 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 | 86% | -1% | 0% | 3% | -1% | -1% | -1% | 8% | | PRG | 96% | 0% | 0% | 2% | 2% | 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 | -1% | -1% | -1% | -1% | -1% | -1% | -1% | -1% | -1% | -1% | | PRG | 0% | 0% | 0% | 0% | 0% | 0% | 0% | 0% | 0% | 0% | | |
| **Describe steps taken to ensure that the PRG is representative of the practice population in terms of gender, age and ethnic background and other members of the practice population:**  Ethnicity within the Patient Representation Group is heavily weighted towards White British, with other ethnic groups having a small representation within the group.  The Patient Representation Group currently has a good mix of new mothers, full time carers, retirees, locally employed city commuters, care home residents and drug and alcohol dependents from the local rehabilitation charity.  Recruitment to the group is voluntary. The practice has continued a blanket approach to recruitment, inviting any registered patients at the practice to join the group. PRG leaflets, including a registration form, are given to **all** patients in their registration packs when joining the practice.  We seek to make the PRG accurately reflect the practice population, and informed by current PRG composition. The GP’s at the practice continue to use their local knowledge of their personal lists to further identify patients in underrepresented groups. GP’s have recruitment leaflets for the PRG in their consultation rooms and invite any patients they feel will support this aim.  Any patients, who have completed Friends and Family Test feedback card, have been contacted by the practice and invited to join the group also. | |
| 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:* | |

1. Review of patient feedback

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| **Outline the sources of feedback that were reviewed during the year:**  The practice maintains a log of all patient feedback, significant events and Friends and Family Test throughout the year. Feedback from the CQC Inspection was also included within this year’s topic suggestions.  The practice contacts the PRG by email, highlighting suggested topics based on of the above sources of feedback. The group is asked to comment on the suggested topic and put forward any further topics for discussion. |
| **How frequently were these reviewed with the PRG?**  Once a year. |

1. Action plan priority areas and implementation

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| Priority area 1 |
| Description of priority area:  **Patient engagement with reception.**   * 1. **Confidentiality when patients engage with reception.**      + 1. **Patients being overheard in reception at:** * The Guildhall - 70% of the group felt this was an issue. * The Guildhall – 80% of patients were happy with patient confidentiality at reception. * Barrow - 60% of the group felt this was not an issue.   + - 1. **Concerns patients may have when asked by reception why they needs an appointment:** * The Guildhall - 60% of the group had concerns about this * Barrow - 67% of the group did not have concerns   + - 1. **Improved patient Confidentiality by using the self-check in machine (at the Guildhall only).** * 50% of the group felt it improved confidentiality in reception * 50% of the group felt it did not improve confidentiality in reception   1. **Waiting times**      + 1. **Patients being informed by the reception team of how long the waiting time for their doctor or nurse appointment would be.** * 60% of the group felt that updates on waiting times by reception was good. * 30% of the group felt that updates on waiting times by reception was poor. * 10% of the group didn’t know. |
| **What actions were taken to address the priority?**   1. The practice would need to invest in major building work to reconfigure the reception area at The Guildhall Surgery to address this issue effectively. This is something that will need to be discussed as a longer term investment in the future as part of a wider configuration. 2. The practice takes patient confidentiality very seriously. All staff within the practice sign a confidentiality agreement and undertaken annual refresher training of NHS Information Governance Standards. The Reception Team have taken part in extended training to refresh their skill set in managing the reception area, with particular attention being paid to patient confidentiality. 3. The practice has invested in a new the telephone system at the Guildhall Surgery so that patients calling the surgery will hear a message by The Senior Partner explaining that the reception team will ask for a brief overview of what the appointment is regarding. This is to support the practice making the right appointments with the correct clinical team member, in the most appropriate time frame. 4. Patients are being advised of waiting times for their doctor or nurse when they check in. If a nurse or doctor is running late, patients are being notified verbally by the reception team as a group, in the waiting area. |
| **Result of actions and impact on patients and carers (including how publicised):**   * Staff training and development of the reception team is projected to reduce the number of negative feedback we received about the reception team. This will be measured by the practice on an on-going basis throughout the year. * The practice has already seen a reduction in negative feedback about the reception team asking this question. Long term impact will need to monitored by the practice. |

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| Priority area 2 |
| Description of priority area:  **Patient awareness of how they can be supported to manage their own health.**   1. **Patient access to regular monitoring of their own blood pressure**  * 66% of patients thought it would be helpful be able to monitor their own blood pressure in a way that does not require direct health professional contact.  1. **The recent changes to the phlebotomy services within the practice and the recent changes at the West Suffolk Hospital have resulted in confusion for many patients.**  * 58% of patient was happy with signposting for patients needing blood tests. * 42% of patients were not happy with the signposting for patients needing blood tests. |
| What actions were taken to address the priority?   1. **Blood Pressure Monitoring**  * The practice has created a dedicated room at The Guildhall Surgery and purchased a blood pressure monitoring machine that is easy to use and provides patients with a print out of their results. * Clear instructions and a demonstration by staff are provided to each patient. We are encouraging patients who wish to monitor their own blood pressure, to come and use the machine. Should patients’ blood pressure falls outside the correct range, they will be seen by a nurse or doctor. * The Barrow Surgery has a blood pressure monitor situated in a separate consultation room that can be accessed by asking a member of the reception team.  1. **Signposting for blood tests**  * Letters are sent directly to patients who have annual and six monthly chronic disease management reviews that require blood tests, with clear instructions of where to go and how to book. * A message on the Jayex board at the Guildhall Surgery to update patients on the new system whilst waiting. * Posters in reception at both sites clearly identifying clinics time for the phlebotomy facilities at both at the practice and the West Suffolk Hospital. * The Jayex board has been updated with a message to patients in the waiting room. * The practice website has been updated to notify patients and careers of the changes. |
| Result of actions and impact on patients and carers (including how publicised):   1. **Blood Pressure Monitoring**  * Due to the facility being new to patients and carers there is currently not enough data to measure the impact this has had. The Practice is anticipating the new machine will impact positively on patients, carers and the practice. Patients will no longer have to wait for an appointment to have their blood pressure taken and free up appointments for other patients. * Patients are being signposted to the new room by their GP, nurses and the reception team alongside chronic disease recall letters. * The Jayex board in reception is highlighted the new blood pressure monitoring room. * The practice website has also highlighted this new facility to patients.  1. **Signposting for blood tests**  * This has impacted immediately on the patients and carers at the practice. The practice is able to provide patients with clear direction on how and where to book their blood tests with up to date and accurate information. |

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| Priority area 3 |
| Description of priority area:  **Patients access to test results.**   1. **Calling the surgery.**  * 50% of patient would like to continue to call the surgery for their test results  1. **Online access.**  * 80% of patients would like to view their test results with a comments from the doctor is results are normal or an appointment needs to be booked. |
| **What actions were taken to address the priority?**   1. The practice will continue to offer this facility to patients wishing to contact the surgery for test results. 2. The practice would like to offer this facility as part of Patient Online in order for patients to view test results with ‘normal’ or ‘book an appointment’ comments by the GP and will seek to do so, subject to IT limitations, as part of the wider changes to patient access to online medical records brought about in the 2015 GP contract. |
| **Result of actions and impact on patients and carers (including how publicised):**   * There is currently an issue with the clinical system being able to provide this function to patients. The practice will continue to monitor the clinical system provider’s progress on this issue and review once it is available to patients. |

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):

**2011/2012 Action Plan**

* The practice continues to keep the website updated and the dedicated areas at each practice updated with information of services offered by the Practice and Primary Care.
* The practice is still not in a position to offer this function as an effective way to communicate between patient and GP. This is an on-going review process that is considered with each IT update the practice undertakes.

**2012/13 Action Plan**

* The practice has continued to expand its use of text messaging to patients. A test messaging service that allows patients to communicate to the practice will be tested in 2015 and following a successful trial will be considered for the future.
* Online appointment booking was launched in January 2014 and has been a successful way for patients to book their appointments without having to call the practice or attend in person.
* The practice has upgraded its telephone system at Barrow and replaced the inherited 0845 number with a geographical number for patients to use.
* Online access for patient to view test results has been added this year’s actions. The practice was hoping to be in a position to offer this facility to patients, however current issues with the clinical system used at the practice has prevent this being rolled out to the patients. We will continue to monitor the situation and review once our system providers have resolved their current technical issues.

1. PPG Sign Off

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| Report signed off by PPG: via email  Date of sign off: 30th March 2015 |
| **How has the practice engaged with the PPG:**  The practice engages with the PRG in a virtual manner via email thereby increasing response rates. These emails include updates from WSCCG and invitations to patient events. During the CQC inspection members of the group were invited in to the practice to meet with the inspectors.  **How has the practice made efforts to engage with seldom heard groups in the practice population?**  The GP personally invite patients that fall into under-represented groups using their knowledge of patient s on their personal list.  **Has the practice received patient and carer feedback from a variety of sources?**  The practice receives feedback from the following sources: Letter, telephone ,in person, through the website feedback form, NHS Choice, Friends & Family Test and via the inspectors from the CQC inspections  **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?**  We have seen a small reduction in the number of negative feedback about the topics covered however there is not enough data over such a short period of time to comment on this accurately.  **Do you have any other comments about the PPG or practice in relation to this area of work?**  The PRG has been invaluable to the practice as a lens through which all the feedback received throughout the year might be evaluated. It also allows the practice to explore issues raised by patients and careers in a structured and detailed manner and a mechanism by which genuine consultation may take place.    The practice will always strive to work with the PRG and its patients at large, to create a service and facility for patients and carers which meet their needs and expectations. |