

# Annex D: Standard Reporting Template

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

Practice Name: Dr Mellor & Partners

Practice Code: C85016

Signed on behalf of practice: *E. Richardson*

Date: 11.03.2015

Signed on behalf of PPG: *D. Ramsden*

Date: 17.03.2015

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, Email											
Number of members of PPG: 16											
Detail the gender mix of practice population and PPG:					Detail of age mix of practice population and PPG:						
%	Male	Female									
Practice	49	51	%	<16	17-24	25-34	35-44	45-54	55-64	65-74	> 75
PRG	31	69	Practice	21	11	13	13	14	12	10	8
			PRG	0	0	0	0	0	19	73	12.5

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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	78%	1%		2%				
PRG	100%							

\*Please note that 17% of patients have not got ethnicity recorded in their records.

	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%								
PRG										

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:

Since the PPG was formed in 2002, representative engagement has always been a priority. Throughout the years, various attempts have been made to encourage individuals from younger patients including rescheduling the times of the meetings, setting up a virtual group and advertising for members in the surgery and on the practice website.

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:

## 2. Review of patient feedback

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

Patient feedback cards have been available for patients to make comments throughout the year. These are reviewed weekly and discussed with the Patient Reference Group at their meetings. This has allowed the practice to respond quickly to any issues and change working practice as necessary throughout the year, in addition to informing the priorities of the practice and PPG.

How frequently were these reviewed with the PRG? At each meeting, normally quarterly. 9.6.14, 8.9.14, 10.11.14, 12.1.14, 9.3.15

### 3. Action plan priority areas and implementation

#### Priority area 1

Description of priority area: Access to the practice to make appointments

What actions were taken to address the priority? The practice implemented Patient Partner, an add on system to the practices telephone service, this allows patients to make, check and cancel appointments 24 hours a day, 7 days a week without having to speak to a member of staff. The practice also provides online access to patients, allowing them to book and cancel appointments and order repeat prescriptions using EMIS access.

Patients are also able to telephone/visit the surgery (from 7:30/8:00am – 6:30pm) to make appointments. We also have a dedicated appointment cancellation line which patients can use to cancel either appointment, allowing the practice to offer these freed up appointments without wasting them.

Result of actions and impact on patients and carers (including how publicised): Information on Patient Partner and EMIS access is publicised on the practices website, patient newsletter and information within the surgery building. Giving patients access to appointments 24 hours a day 7 days a week has resulted in less phone calls to the practice, freeing up reception time and phone lines, giving those in need of priority assistance easier access to the practice.

## Priority area 2

Description of priority area: Telephone access

What actions were taken to address the priority? The practice implemented Patient Partner, an add on system to the practices telephone service, this allows patients to make, check and cancel appointments 24 hours a day, 7 days a week without having to speak to a member of staff. The practice has also introduced a dedicated cancellation line, so that patients can leave a message to cancel their appointment.

We also introduced further GP telephone appointments for patients to book.

Result of actions and impact on patients and carers (including how publicised): The practice publicised Patient Partner and the introduction of further telephone appointments in the surgery, in the practice newsletter and on line. Staff were trained to offer telephone appointments to patients dependent on the reason for the appointment request.

These appointments have proved popular with our patients, they allow access to a GP without the inconvenience of having to attend the surgery where this is appropriate. In the case of carers, who often find it difficult to arrange for someone to cover for them, these appointments have been particularly welcome.



### Priority area 3

Description of priority area: Medicines wastage – repeat prescriptions/pharmacy reordering on patients behalf. The Patient Group were concerned with the amount of money being wasted by the reordering of unnecessary medications.

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

A meeting was held on 8 September 2014 with representatives of local pharmacies and the PPG where processes were discussed. The practice pharmacy advisors were also in attendance and they reiterated to pharmacies what the process should be when ordering repeat prescriptions on behalf of patients. The meeting helped to explain to patients the complex processes that have to be followed, by both the practice and pharmacies, in issuing repeat prescriptions due to the clinical governance for patient safety.

Result of actions and impact on patients and carers (including how publicised): . The meeting held explained the practice process for issuing repeat medications and allowed the local pharmacies to explain how their processes worked. The CCG Pharmacy Advisors took this opportunity to remind everyone that patients should be telephoned to check which of their medications were needed before reordering from the practice.

This piece of work is ongoing, however, patient group members have reported that pharmacies are checking with them which of their medications are needed for the following month before reordering with the practice.



## 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):

1. Continue to provide information to patients in ways they prefer most.

The practice continues to ensure that information is kept up to date and all new developments are advertised widely; notices in surgery, the practices website, newsletters etc.

2. Improve telephone access

We have adjusted staff rotas to ensure that most staff work during busy periods, we have introduced "Patient Partner" and widely advertised the online services, which all allow patients to book, cancel, check and order repeat prescriptions without having to contact the surgery. These services are available 7 days a week, 24 hours a day.

3. Monitor appointment system & allow appointments to be booked 2 weeks in advance

We continue to monitor the appointment system, nurse appointments are available 4 weeks in advance and GP appointments 2 weeks in advance. We have increased the number of appointments available on line to 33% and have introduced Patient Partner, allowing routine appointments to be booked over the telephone without having to speak to a member of staff.

4. Continue to use simple feedback forms to canvass patient opinion after visiting the surgery & to monitor improvements in action plan

This is an ongoing piece of work and the practice has now introduced the Friends & Family Test via feedback cards and an online service. This allows us to seek patient opinion continuously and also allows for improvements to be made quickly.

5. Reduce number of patients failing to turn up for appointments

The practice policy was amended, any patients failing to attend 2 appointments within a 6 month period will be removed from the practice list.

6. Improve telephone access to GP and nurse

The practice has introduced more telephone appointments with GPs following discussions on what was felt could be appropriately dealt with on the telephone, this includes follow ups and test results.

7. Monitor receptionist performance

This is ongoing, all members of staff have annual appraisals and the practice delivers training throughout the year.

8. Improve access to GPs

We are considering providing further lunchtime appointments, patient opinion is being canvassed alongside the Friends & Family test.

4. PPG Sign Off

Report signed off by PPG: YES *D. Ramsden*

Date of sign off: *17 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?

Yes, the practice widely advertises the patient group and has tried to attract younger patients by moving the times of the meetings.

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

Yes, the practice asks for feedback both on the website and within the surgery building using simple feedback cards for comments.

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

Yes, the PPG was asked to agree 3 priority areas, these were discussed at the PPG meeting and members decided which areas to focus on. The resulting action plan was discussed and agreed with members at the PPG meetings.

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

Telephone access to the surgery has improved with the introduction of Patient Partner, a dedicated cancellation line and the on going promotion of on line services.

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

No, the PPG feel that the practice has worked well with the PPG to address the priority areas and this has resulted in improved access to the surgery.