

**Bath, Gloucestershire, Swindon & Wiltshire Area Team  
2014/15 Patient Participation Enhanced Service – Reporting Template**

Practice Name: Chew Medical Practice

Practice Code: L81072

Signed on behalf of practice:

Date:

Signed on behalf of PPG:

Date:

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 and Email											
Number of members of PPG: 27											
Detail the gender mix of practice population and PPG:				Detail of age mix of practice population and PPG:							
%	Male	Female									
Practice	50	50	%	<16	17-24	25-34	35-44	45-54	55-64	65-74	> 75
PRG	34	66	Practice	18	8	8	12	16	14	14	10
			PRG	0	0	4	15	22	7	41	11

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	93			2	<1	0	>1	<1
PRG	93			7	0	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
PRG	0	0	0	0	0	0	0	0		0

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:

The list is reviewed annually, and patients are directly approached in order to improve the age and gender balance. Specifically, some members with young families have been recruited, also carers. There is excellent geographical spread from across the catchment area, including patients from the main villages and those from remote rural areas. The practice catchment area does not include any significant minorities such as travellers, drug users, residential homes. The patients are a good mix of those with long term conditions who visit the surgery regularly and those who rarely need to come. Of the small number of ethnic minority patients, the majority are mixed parentage families, one of which is represented on the group by the white mother.

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:

N/A

## 2. Review of patient feedback

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

Complaints  
Individual GP surveys  
Friends & Family Test  
Patient suggestions

How frequently were these reviewed with the PRG?

Annually

3. Action plan priority areas and implementation

Priority area 1
<p>Description of priority area:</p> <p><b>Communication with patients</b></p>
<p>What actions were taken to address the priority?</p> <p><b>Completed:</b></p> <ul style="list-style-type: none"><li>Text message appointment reminders</li><li>Ongoing training for front-line staff: every complaint or comment is discussed individually with the person responsible if they are known, and is taken to a team meeting to make sure that lessons are learned by all receptionists/dispensers</li><li>Patients have been given access to information online about medication, allergies and immunisations</li><li>The Friends &amp; Family Test has been installed, both in paper format and on a tablet</li><li>Handouts/flyers on hospital admission and on how the triage system works are in use</li></ul> <p><b>Still to do:</b></p> <ul style="list-style-type: none"><li>More leaflets/handouts for patients on our service</li><li>Newsletter: a prototype has been designed, and will start regular production shortly.</li></ul>

The current list of practice charges will be updated to include NHS charges (e.g. for prescriptions) as well as private fees.

Explanation of our systems: complaints in the past year have made us aware that patients don't always know how things work, so we will all be more careful about explaining processes clearly.

A new protocol will be drawn up to make sure that patients are offered a greater level of support after a distressing consultation.

Patients' online access to their own records will be extended further to include access to a list of diagnoses.

A new website is in preparation.

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

Text reminders were introduced last Autumn and are working well – patients appreciate them. Analysis of DNAs to be done (see below) to assess impact. Patients are told at the time of booking that they will get a text reminder.

Staff training: in most cases, the member of staff is aware of their mistake, and has suffered a lapse of concentration rather than genuinely not knowing how to behave.

Online access to patient information has been publicised in the surgery (notices, electronic board), on the website and in the local paper. There is a steady increase in the number of patients with online access.

Friends & Family Test has been publicised widely in the surgery and on the website. Results are 89% positive so far, and all free text comments have been positive.

Handouts/flyers are given to patients as necessary and available to pick up in the surgery. The content is also on the website. The ones in use so far have helped patients to understand how our systems work.

## Priority area 2

Description of priority area:

### **Accuracy of work / reducing errors**

What actions were taken to address the priority?

Minimising dispensary errors: continuous improvement to systems, including reduction in dependency on human checking, use of more clearly visible labels; better allocation of tasks among dispensary team to provide clear ownership; errors are reviewed at every monthly team meeting.

Minimising risk of test results being overlooked: process in place for GPs to cover absent colleagues and to initiate any action that is necessary.

Getting appointments right every time: double-checking system in place for all appointments loaded onto computer system; booked nurse appointments checked each week; list of procedures that nurses can perform updated regularly as skills develop.

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

These actions have not been publicised to patients as they are purely internal administrative changes.

All changes have had an incremental positive impact on errors and complaints.

## Priority area 3

Description of priority area:

### **Appointments**

What actions were taken to address the priority?

#### **Completed:**

Availability of GP appointments extended from 4 to 6 weeks beforehand.

Full analysis & benchmarking of appointment system undertaken, to try to identify why there seems to be a long wait to see a doctor of choice.

Two extra nurses trained in management of minor illness, with a view to offering nurse-led minor illness clinics every morning and afternoon.

#### **Still to do:**

Automated telephone system to be introduced that will enable patients to book & cancel appointments 24/7 if they choose to use it.

Analysis of “did not attends” to be carried out ; patterns will be identified and actions considered with the aim of reducing the numbers.

Full implementation of nurse-led minor illness clinics.

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

Extension of GP appointment availability: soft launch only so far, no publicity. Has not led to significant numbers of patients booking further ahead.

Benchmarking of appointment system: only significant difference that was found between our practice and others was the availability of a dedicated duty doctor all day, and as this is known to be greatly valued by patients, no change was made.

Nurse minor illness clinic is promoted to patients when they ring for urgent appointments. It has had the effect of releasing GP appointments and has contributed to an improvement in wait times for routine appointments.

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):

The patient group agreed this year that almost all the issues raised in patient feedback had been raised previously, so the majority of this year's completed and planned actions have been identified in patient surveys and build on previous years' action plans.

Specifically:

Work on improving availability of appointments with doctor of choice: benchmarking and analysis was a direct result of issues raised in last year's local patient survey.

Improving patient information leaflets and web content: at risk of providing too much written information, it is clear that patients do not always understand how we work, and the patient group has helped us to focus on providing the most relevant and important information, e.g. what happens before and after a hospital referral.

Minimising errors: every year a small number of patient complaints relate to errors, especially in the dispensary, and we have discussed new approaches with the patient group each year.

4. PPG Sign Off

Report signed off by PPG: YES

Date of sign off: 19 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?

Patient group is broadly representative, no obvious unrepresented groups.

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

Yes, as set out above.

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?

More flexibility in booking appointments, better patient information, generally a more patient-centred approach can now be felt in the practice. As one patient wrote on a Friends & Family Test form, "This is a practice where I, as patient, feel that my needs are at the centre of the whole operation. It is holistic, efficient and an excellent service."

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

No