

Annex D: Standard Reporting Template

London Region [North Central & East/North West/South London] Area Team
 2014/15 Patient Participation Enhanced Service – Reporting Template

Practice Name: The Law Medical Group Practice

Practice Code: E84006

Signed on behalf of practice: *Signature removed for security*

Date:

Signed on behalf of PPG: *Signature removed for security*

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 / Email											
Number of members of PPG: 271											
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	49%	51%	Practice	20%	9%	18%	17%	14%	9%	6%	6%
PRG	37%	63%	PRG	0%	5%	24%	13%	16%	15%	16%	10%

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	Mixed
Practice	15%	3%	N/A	23%	N/A	N/A	N/A	3%
PRG	26%	6%	N/A	15%	N/A	N/A	N/A	4%

	Asian/Asian British					Black/African/Caribbean/Black British			Other	
	Indian	Pakistani	Bangladeshi	Chinese	Other Asian	African	Caribbean	Other Black	Arab	Any other
Practice	12%	3%	0.3%	0.5%	5%	6%	11%	1%	0.4%	16%
PRG	13%	3%	0.5%	0%	4%	6%	11%	5%	N/A	6.5%

NB: 11% of practice population has unknown ethnic origin (excluded from above calculations).

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 practice created a Patient Representative Group (PRG) sign-up sheet which requested patients' names, addresses, email addresses and further details regarding age, gender, how often they attended the practice, and also where/how they had heard about the PRG. Patients were able to indicate if they wished to join the PRG and were given a choice as to whether they wished to physically attend the meetings or wished to be part of our virtual email group. We also enquired as to how they found out about the PRG, in order to monitor the most successful methods of reaching our patients. The PRG was advertised on our website, on our reception desks as well as on the TV screen, Lifechannel, which is broadcast in the waiting area. In addition, patients were actively recruited by receptionists, clinicians at consultations and at new registrations. This ensured a range of different patients with different clinical conditions were offered the opportunity to be part of the PRG. In addition, sign-up sheets were also available to download from the practice website. In order to maximise the amount of sign-up sheets returned, the practice offered an incentive for the receptionists who recruited the most patients to our group. The three receptionists who recruited the most were then awarded a prize. Sign-up sheets were posted to patients who were regular attendees at the practice's bi-annual Patient Forums. This ensured that the maximum number of patients were reached, and those of all different profiles.

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? YES/NO

If you have answered yes, please outline measures taken to include those specific groups and whether those measures were successful:

The practice has a higher than average prevalence of patients who suffer with diabetes (5.6%) and hypertension. We have a slightly higher than average population aged over 65 (12%). (Data from London Health Observatory data). The practice looks after a large Nursing Home and also looks after housebound patients. For the housebound patients, sign-up sheets were consistently placed in doctors visits bags, and clinicians were repeatedly reminded verbally and through email of the importance of encouraging these patients to sign-up. Emails were also sent to staff to encourage them to recruit patients with learning and other disabilities and also those patients who are acting as carers to others. In regard to our patients at the Nursing Home, a Partner arranged a meeting with some of the residents and gave a presentation on the PRG, encouraging patients to sign-up. This led to us gaining residents of the Nursing Home as members of our PRG, who would have normally found it difficult to engage with the practice.

2. Review of patient feedback

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

We reviewed written complaints and comments received by the practice over the period of the previous year. We also reviewed comments from the NHS Choices website, feedback from the Friends and Family Test as well as previous practice surveys. We collated all this information into a single document on 2 occasions over the year, summarising the main themes and presenting this information to our PRG meetings for discussion and identification of priority areas.

How frequently were these reviewed with the PRG?

These were reviewed twice during the year at PRG meetings.

3. Action plan priority areas and implementation

Priority area 1

Description of priority area:

Telephone access: patients were concerned of the cost of calling an 0844 number and having to wait for a prolonged period before speaking with a receptionist.

What actions were taken to address the priority?

Following a lengthy negotiation with our previous as well as new telephone service providers, our telephone number was changed to an '020' number as of 25th November 2014.

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

We have publicised changes to our practice telephone number through posters in the waiting room, through informing patients and their carers verbally in the practice, in the practice newsletter as well as on our website. We are no longer receiving complaints about the cost of phoning the practice. We are looking at introducing a new appointment system in April 2015 as well as promoting online access which should further reduce telephone waiting time to speak with a receptionist for both our patients and their carer's.

Priority area 2

Description of priority area:

Communication: it was suggested that the practice could communicate better with its patients. Suggestions for improvements included creating a newsletter, improving uptake of online services, increasing online services and email communication.

What actions were taken to address the priority?

A newsletter was created and published in January 2015. We asked our PRG if they wished to contribute to this newsletter and hope their participation will occur in future editions.

Online services are advertised via posters in the waiting area, the practice newsletter and in leaflets in doctor's rooms. We have looked at the possibility of email communication with the practice and plan to arrange this once we have introduced the necessary safeguards and have dedicated staff for this purpose. The practice aims to pilot email communication within the next six months.

Patients are now able to view parts of their medical record online.

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

The newsletter was posted on the practice website, emailed to PRG members (we have a large virtual PRG group) and was made available in reception. The newsletter helped patients become aware of new/existing services in the practice and also changes i.e. to the telephone number, staff changes etc. We aim to publish this at least bi-annually as a means of keeping our patients informed of changes within and external to our practice as well as providing information on resources in the community.

The increased use of online services and the option to view medical records online allows for easier patient and carer access to the surgery. It also frees up telephone access for those who are either unable or unwilling to use online services. There has been a 12% increase in the amount of appointments booked online in the last year. We have also publicised these outcomes at our PRG meeting.

Priority area 3

Description of priority area:

Reception: Our previous surveys have recognised a generally high level of satisfaction with the service received from our reception staff. However, feedback received during the year identified potential area for improvement. We agreed with our PRG that further staff training would be beneficial. In addition, it was felt that increasing privacy and hence confidentiality at our Wembley branch reception desk should be a priority.

What actions were taken to address the priority?

It is planned to examine alternative queuing systems at our Wembley surgery in order to protect privacy. Our reception team have monthly meetings led by the reception manager. These meetings include 'role-play' training exercises. All staff had information governance training on the 6th February 2015. A Kilburn locality-wide customer care training programme has been arranged through the network for all our reception staff and this is due to take place prior to July 2015.

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

Our reception training programme and future plans were publicised at our PRG meeting in February and other members were informed via receiving the minutes through email. Our aim is to improve our customer service and patient and carer experience. We will monitor this by assessing both complaints and compliments for our reception staff as well as through our regular reception meetings.

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):

This is the fourth year that the practice has participated in the scheme and has made some positive changes as a result of patient involvement. Highlights of these are listed below:

- **'Drop-in' box created for Wembley reception for repeat prescription requests which has alleviated queuing**
- **Practice website redesigned following feedback that it could be more user-friendly**
- **Improved advertising of online services were introduced to increase awareness of the service**
- **Patient led forum took place**
- **Advertisements for PRG meetings edited to be more effective**
- **Phlebotomy service surveyed to ensure satisfaction following concerns from PRG regarding waiting times**

4. PPG Sign Off

Report signed off by PPG: **YES**

Date of sign off: **26/03/2015**

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?

The practice has tried very hard to have meaningful engagement with all groups within the practice. The receptionist remind patients when the forum meetings are on and try to encourage them to sign up, they have reminder leaflets on reception, posters around the surgery and reminders on the website.

Yes, they receive it from the comment box on reception, online, at the patient forum and you can always write to the doctors.

Yes, the patient forum suggests things that could be improved, the practice come up with an action plan and then implement it.

Yes, the repeat prescriptions work much better now having access to both surgeries sometime helps to get appointments quicker if there is a cancellation at the other surgery and is a more efficient use of the doctors time.

It is a very efficient well run practice and participates well with patients.