

Annex D: Standard Reporting Template

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

Practice Name: Darwen Healthcare

Practice Code: P81051

Completed by: Ann Neville Date: 17 March 2015

Signed on behalf of PPG: *Rob J. A. Jones, chair* Date: 17 March 2015

Please confirm that the report has been published on the practice website by 31st March 2015 YES

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, Other (please specify) Face to Face Meetings held every 2 months.
Number of members of PPG: 14

Detail the gender mix of practice population and PPG:

%	Male	Female
Practice	49.8%	50.2%
PRG	36.0%	64.0%

Detail of age mix of practice population and PPG:

%	<16	17-24	25-34	35-44	45-54	55-64	65-74	> 75
Practice	19.9%	9.6%	13.5%	13.5%	15.5%	12.4%	9.64%	6.2%
PRG	0%	14.3%	14.3%	14.3%	14.3%	21.5%	14.3%	7.0%

Detail the ethnic background of your practice population and PRG:

	White			Mixed/ multiple ethnic groups		
	British	Irish	Gypsy or Irish traveller	White &black African	White &Asian	Other mixed
Practice	11791	20	3	9	17	4
PRG	12	0	0	0	0	0

	Asian/Asian British				Black/African/Caribbean/Black British		
	Indian	Pakistani	Bangladeshi	Chinese	African	Caribbean	Other
Practice	7	81	4	32	19	5	8
PRG	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 Patient Reference Group is representative of our practice consisting of 35% Male and 65% Female members. Our members are representative of all age groups apart from the 0-16 years category and are representative of the single, married, employed, unemployed, retired, parent of young children, carer, learning disability and chronic disease groups such as Diabetic, COPD and Asthma. The group had placed posters on their notice board and waiting room advertising the group in the hope of recruiting new members and has increased in size by 4 (40%) over the past twelve months.

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

If you have answered yes, please outline measures taken to include those specific groups and whether those measures were successful:
Our practice population between 0 and 24 years equates to 25% and the group had actively advertised looking to recruit representation from this group and now have 2 new members.

2. Review of patient feedback

Outline the sources of feedback that were reviewed during the year:
Feedback reviewed during the year was received by email to the generic Darwin Healthcare Email Account, via the Darwin Healthcare Website, Letters and Thank You cards, Patient Reference Group Mini Survey and face to face praise directly to the practice team or practice manager. PRG Chair and Practice Manager meet up monthly to discuss updates and the Chair also spends a couple of hours each month in the waiting area chatting and listening to patient's comments.

How frequently were these reviewed with the PRG?
Feedback was reviewed at each meeting and also discussed any constructive feedback in order to improve services.

3. Action plan priority areas and implementation

Priority area 1
<p>Description of priority area: Collection of prescriptions and checking in for appointments Some members of Patient Reference Group had experienced issues when collecting prescriptions from the reception desk. Historically being a very busy practice there were constantly queues and at times patients complained if they were in a queue when pharmacies were collecting bulk prescriptions. Suggestions were received from the Patient Reference Group.</p>
<p>What actions were taken to address the priority?</p> <ol style="list-style-type: none">1. Wrote to local pharmacies explaining that the practice planned to implement a standard pharmacy collection point2. Additional Receptionist recruited and to be located on the reception front desk during busy periods i.e. 08:00 -11:00 and 12:30-2:30 and 4:30-6:003. Purchase new Jayex Self Check In Machine4. Advertise in waiting areas, LED screens, Notice-boards and Practice Newsletters.
<p>Result of actions and impact on patients and carers (including how publicised):</p> <ol style="list-style-type: none">1. Additional receptionist at busier periods and self-check in screen does help in keeping the queues down2. Photo Frame displayed showing pharmacy pick up point displayed on front reception desk and advertised in the June Newsletter and displayed on the website.3. Purchased a new Jayex self-check in machine allowing a speedy check in with facility to update contact details, information also placed on website4. The above actions helped to keep queues to a minimum, and worked with pharmacies which is beneficial to patients and carers especially if urgent prescriptions need to be dispensed and delivered.

Priority area 2

Description of priority area:

Patient Reference Group expressed an interest in improved access at the seasonal flu immunisation clinics from September to March. Patients expressed the need for appointments at various time of the day i.e. morning, afternoon, and early evening over a longer period.

What actions were taken to address the priority?

1. Practice held a flu planning meeting in July. The chair attended to voice the opinions of the Patient Reference Group.
2. Clinics were planned for over the autumn and winter period at various times throughout the day.
3. Patient Reference Group volunteered to help in the Flu Immunisation Clinics by handing out the "Important Facts Leaflet and Patient Reference Group Survey.

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

1. Clinics were better planned
2. Patient Reference Group and Practice working together
3. Patient Reference Group took advantage of also handing out survey forms to all patients attending clinics and GP appointments. Extremely high amount of completed forms returned.
4. Advertised in newsletters in August, October and November. Advertised on website, noticeboards and Jayex boards.
5. Good Attendance Rates for patients and carers (Uptake in Carers having seasonal flu immunisations up by 45%) child immunisations were up by 7% and the over 65's uptake was 73.27%.

Priority area 3

Description of priority area:

Improve the process and availability of pre-bookable appointments for face to face and telephone consultations where a face to face consultation is not actually needed. Develop a process of ensuring that the split between on the day appointments and pre-bookable appointments is right. Offer a selection of later pre-bookable appointments including later appointments for nurses.

What actions were taken to address the priority?

1. Clinical Staff given training on telephone skills
2. Carry out capacity and demand audit on appointment booked and attended and whether the appointment reason was appropriate for the clinic appointment or would a telephone consultation be more appropriate.
3. Gradually reduce the on the day clinics and create more pre-bookable appointments with named GP.
4. Adjust list sizes to ensure that patient lists are comparable with sessions worked.
5. Place appointments on clinical system earlier in order that patients can book up to 5-6 weeks in advance.

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

1. Waiting times for pre-bookable appointments down considerably by reducing some of the on the day appointments in the middle of the week but still meeting the demand for on the day appointments
2. Patients and carers can now book pre-bookable appointments up to 5-6 weeks in advance
3. Patients and carers can request telephone consultations rather than face to face if appropriate.

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):

Last years PRG Report listed the following actions for 2014/2015:

- Telephone Consultations – Completed
- Additional Receptionists - Completed
- Additional staff member on the phones between 08:00 and 09:00 – Completed
- Ability to book pre-bookable appointments easier due to Advanced/ Nurse Practitioner conducting on the day clinics– Completed
- Raised patient and carer awareness of Appointments 6:30 -8:00 pm on a Monday by advertising on Jayex Board, Website and Newsletter

4. PPG Sign Off

<p>Report signed off by PPG: YES</p> <p>Date of sign off: 17 March 2015</p>	<p>How has the practice engaged with the PPG:</p> <p>How has the practice made efforts to engage with seldom heard groups in the practice population?</p> <p>Has the practice received patient and carer feedback from a variety of sources?</p> <p>Was the PPG involved in the agreement of priority areas and the resulting action plan?</p> <p>How has the service offered to patients and carers improved as a result of the implementation of the action plan?</p> <p>Do you have any other comments about the PPG or practice in relation to this area of work?</p> <p>The practice has effectively advertised the PRG to patients and carers via posters and newsletters. The priority areas were discussed at March Meeting and agreed at the meeting held 28 July 2015. PRG were heavily involved in the flu campaign, handing out the survey and providing lots of ideas which has resulted in improved services for patients and carers. The Carers Service have attended a meeting and left lots of promotional information for the practice to use and is placed on the Carer's notice board.</p> <p>The members of the practice PRG have worked so tremendously hard and been very supportive to the practice in being involved in suggestions and ideas for improvement. The work has resulted in lots of positive feedback and praise for staff and have now created a "praise folder" which is evidence of the improvements made.</p>
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