

Annex D: Standard Reporting Template

South Yorkshire and Bassetlaw Area Team
2014/15 Patient Participation Enhanced Service – Reporting Template

Practice Name: Manchester Road Surgery
Practice Code: C88044

Signed on behalf of practice: Alison Broadhead Date: 16/3/2015

Signed on behalf of PPG: Tony Day (See attached scanned signature page) Date: 12/3/2015

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, Other (please specify): Email and once a year face to face																																					
Number of members of PPG: 12																																					
Detail the gender mix of practice population and PPG: <table border="1" style="margin-left: 20px; border-collapse: collapse; width: 100%;"> <thead> <tr> <th style="width: 20%;">%</th> <th style="width: 40%;">Male</th> <th style="width: 40%;">Female</th> </tr> </thead> <tbody> <tr> <td>Practice</td> <td style="text-align: center;">49.8</td> <td style="text-align: center;">50.2</td> </tr> <tr> <td>PPG</td> <td style="text-align: center;">33.3</td> <td style="text-align: center;">66.7</td> </tr> </tbody> </table>	%	Male	Female	Practice	49.8	50.2	PPG	33.3	66.7	Detail of age mix of practice population and PPG: <table border="1" style="margin-left: 20px; border-collapse: collapse; width: 100%;"> <thead> <tr> <th style="width: 10%;">%</th> <th style="width: 10%;"><u><16</u></th> <th style="width: 10%;">17-24</th> <th style="width: 10%;">25-34</th> <th style="width: 10%;">35-44</th> <th style="width: 10%;">45-54</th> <th style="width: 10%;">55-64</th> <th style="width: 10%;">65-74</th> <th style="width: 10%;"><u>> 75</u></th> </tr> </thead> <tbody> <tr> <td>Practice</td> <td style="text-align: center;">20.1</td> <td style="text-align: center;">7.2</td> <td style="text-align: center;">11.1</td> <td style="text-align: center;">15.5</td> <td style="text-align: center;">14.1</td> <td style="text-align: center;">12.5</td> <td style="text-align: center;">9.3</td> <td style="text-align: center;">10.2</td> </tr> <tr> <td>PPG</td> <td style="text-align: center;">0</td> <td style="text-align: center;">0</td> <td style="text-align: center;">8.3</td> <td style="text-align: center;">8.3</td> <td style="text-align: center;">25</td> <td style="text-align: center;">25</td> <td style="text-align: center;">25</td> <td style="text-align: center;">8.3</td> </tr> </tbody> </table>	%	<u><16</u>	17-24	25-34	35-44	45-54	55-64	65-74	<u>> 75</u>	Practice	20.1	7.2	11.1	15.5	14.1	12.5	9.3	10.2	PPG	0	0	8.3	8.3	25	25	25	8.3
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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								
PPG								

	Asian/Asian British					Black/African/Caribbean/Black British			Other	
	Indian	Pakistani	Bangladeshi	Chinese	Other Asian	African	Caribbean	Other Black	Arab	Any other
Practice										
PPG										

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:

We have only been routinely recording ethnicity in the last 2.5 years; as such our data relating to ethnicity is not truly representative of our full practice population and has not been included in our report. (Currently only 25% of our patients have their ethnicity recorded)

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:

Comment from a member of the PPG – *‘the invite to join the PPG is cross the board I presume and if people of whatever ethnicity do not come forward what can the practice do to fulfil this requirement? Is this another topic for discussion by the PPG?’*

We will take this forward in 2015/16 and discuss with our PPG how to address this issue.

2. Review of patient feedback

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

CQC report (practice data only not as a result of a visit) NHS choices feedback, national GP patient survey. Shortly to commence FFT feedback.

How frequently were these reviewed with the PRG?

Manchester Road surgery PPG are sent regular emails about things such as practice changes (we changed our advertised times for prescription line at the start of 2014) and are sent copies of the practice newsletters when they are published.

Once a date was set for the annual face to face meeting an email was sent on the 18th September to the group and we attached data from the patient survey and comments from NHS choices so that the PPG could look at the information before the meeting. Those that couldn't attend the meeting were given opportunity to feedback via email/in person or by letter (which 1 member does prefer to do). The rest of the group discussed the data at a meeting held at the surgery on 4th November 2014 and subsequent emails to review progress.

Action plan priority areas and implementation

Priority area 1
<p data-bbox="203 437 589 472">Description of priority area:</p> <p data-bbox="203 539 663 574">Customer service training required.</p>
<p data-bbox="203 681 887 716">What actions were taken to address the priority?</p> <p data-bbox="203 753 2007 855">The comments on NHS choices were mainly positive but some had mentioned that there have been issues with a rude receptionist. As the member of staff hadn't been identified individually the PPG suggested that it may benefit the whole team to have some customer service training. The group felt that this would be useful for all staff not just receptionists.</p> <p data-bbox="203 892 2040 957">The practice had an opportunity to give staff training on 20th January 2015 when all Sheffield practices were offered funding to close and have in house PLI's. An external trainer was booked and all staff attended a 'Customer facing skills' course. The course aims were to</p> <ul data-bbox="253 962 1290 1134" style="list-style-type: none">• Understand the pressure and culture of being on front line.• Understand the importance of being a team member• Understand personality types• Body language and dealing with conflict, listening skills and the art of asking.• Understanding context, assertiveness, and prioritising workloads.
<p data-bbox="203 1283 1312 1318">Result of actions and impact on patients and carers (including how publicised):</p> <p data-bbox="203 1355 2040 1390">As we only received the training in January it's a little too soon to assess how our receptionist's responses to pressure and conflict will change</p>

as a result of what was learnt when they attended the course. Certainly one of our receptionists was surprised to learn that body language is key to how people read and respond to each other! The PPG were notified that the training had been undertaken and a 'you said we did' notice was placed in our waiting room and posted on our website. All receptionists and clinical staff (with the exception of GP's) now all have name badges so that if a patient does have problems in future the individual can be identified and the problem reported to the practice manager.

Priority area 2

Description of priority area:

Problem with being overheard at reception. If the patient wants to query something of a personal nature or doesn't want personal information being over heard this is a problem.

What actions were taken to address the priority?

The PPG acknowledged that making physical changes to how the reception area is designed is not feasible. They suggested that the practice put up a notice that acknowledges the problem and informs patients that if they do not wish to be overheard they should ask the receptionist if they can be seen at the side door (which is adjacent to the corridor and much more private).

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

Although this is something that reception staff would have suggested anyway if a patient had requested to speak somewhere more privately. Putting up a notice advising patients that it's ok to ask that question is more reassuring for them as there is no dilemma about whether or not the receptionist will deal with the request positively. There is also a consistent approach from the reception team who are all clear now about

what to do if they get a request for privacy.

The PPG were notified that the poster had been put up and a 'you said we did' notice was placed in our waiting room and posted on our website.

Priority area 3

Description of priority area:

Notice boards/leaflets in the waiting room too 'busy'

What actions were taken to address the priority?

This problem was not picked up by the PPG looking at other patient's feedback but was something that they felt was a problem for the surgery.

One member of the PPG suggested that the notice boards could be themed (child health etc), and be less 'busy'. Other members also thought that the whole of reception had too much information (on the walls) and that it was overwhelming.

The posters and notices in reception were scaled down considerably and the notice boards are now themed e.g child health, current health campaigns etc. Duplicate leaflets have been removed and more information is on display in the porch.

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

There has been a much better uptake of information leaflets being taken away, particularly from the porch area. 'Choose well' and 'Miracle cure' information leaflets which had previously not been taken away by patients have to be restocked much more often. This is positive as the more information we can pass on to our patients about self-care initiatives the better as this should have an impact on reducing inappropriate access to GP and secondary care services.

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):

Our action plan for 2013/14 was related to the practice website and the following work was recommended.

Review what links we have to other websites/do they work/are they up to date?

Add links to the most commonly requested websites e.g children's health/pregnancy

List all staff and job title

Review the accessibility of the website e.g. add google translate/text size increase/decrease/web site customising setting.

Add a site map

Add a commonly asked questions page

Look at the websites reviewed by the patient group, how are they set out? Make the website flow better.

Add information about how to find/get to the surgery.

The patient group originally suggested that alerts via Face book and Twitter would be a good way to communicate quickly with patients. It seems though from the results of the survey that at this stage the majority of patients would not find this useful. Due to concerns from the practice manager about how much time it would take to monitor comments etc this will not be rolled out at present until there is sufficient interest.

The work to complete all the changes to the website was finished in May 2014. The new website has the seal of approval from our patient group!

3. PPG Sign Off

Report signed off by PPG: YES

Date of sign off: 12/3/2015

How has the practice engaged with the PPG: Face to face/email/post

How has the practice made efforts to engage with seldom heard groups in the practice population? *Future work for the PPG*

Has the practice received patient and carer feedback from a variety of sources? *Future work for the PPG*

Was the PPG involved in the agreement of priority areas and the resulting action plan? *Yes (I think so!)*

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

Do you have any other comments about the PPG or practice in relation to this area of work? *A useful exercise, feel being part of the practice is important.*

Comments in italics are from 1 member of the PPG - MB

