

**Arden, Herefordshire and Worcestershire Area Team
Patient Participation Enhanced Service 2014/15 – Reporting Template**

Practice Name: **Lisle Court Medical Centre**

Practice Code: **M84603**

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 and Email													
Number of members of PPG: 17													
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	58%	42%		Practice	15	11	27	17	12	8	6	4
	PPG	58%	42%		PPG	0	0	6	6	18	41	23	6

Detail the ethnic background of your practice population and PPG:

	White				Mixed/ multiple ethnic groups			
	British	Irish	Gypsy or Irish traveller	Other white	White &black Caribbean	White &black African	White &Asian	Other mixed
Practice	21%	0.7	0	14%	0.2	0.05	0.4	0.8
PPG	82%							

	Asian/Asian British					Black/African/Caribbean/Black British			Other	
	Indian	Pakistani	Bangladeshi	Chinese	Other Asian	African	Caribbean	Other Black	Arab	Any other
Practice	21%	0.05	0.07	0.62	2.2	0.83	0.46	0.18	0	0.89
PPG	18%									

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:

Practice has identified that we do not have ethnicity information for a large proportion of our patients. This will be gathered going forwards on an ongoing basis. The Practice ethnic background given above is therefore incorrect, particularly with regards to the % of white British.

We advertise our meetings within the surgery a month before, inviting patients to attend if they are interested. Invite to join the group is prominent on the web-site. Recent patient questionnaire have included a question asking if people would like to be involved and they will be contacted and invited to meet with Practice Manager with a view to coming to the next meeting or being added to the virtual group and giving/receiving feedback via email. We also give out flyers to invite patients to be part of the group, and also send out text messages inviting patients to participate. We feel that texting helps us to reach our younger population. We continue to focus on recruiting a fair representation of the practice population.

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:

We have a high number of students and patients in the 17-34 year old age bracket. This is a group we will continue to try and reach, both via texts and e-mails. Also opportunistically within the Practice.

2. Review of patient feedback

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

The National Patient Survey
Surgery Patient Survey
Friend and Family test

How frequently were these reviewed with the PRG?

This year they have been reviewed once, FFT has only just begun. Going forward responses from FFT will be reviewed during each meeting and further survey designed if felt necessary by the PPG.

3. Action plan priority areas and implementation

Priority area 1
Description of priority area: National Patient Survey Results
<p>What actions were taken to address the priority?</p> <p>Staff meetings held, local survey conducted and results compared. Discussed with PPG to highlight priorities within both surveys. The local practice survey results were better than the National Patient Survey. Plan to continue to monitor via FFT and further survey as required.</p>
<p>Result of actions and impact on patients and carers (including how publicised):</p> <p>Areas to address include patient dissatisfaction if clinics run late. As discussed with the PPG, signage has been implemented to make patients aware that they can ask reception for information regarding waiting times, and explaining that on occasion clinics may run late if there has been an unexpected event.</p> <p>Revised content of the notice boards, more information displayed regarding services offered by the surgery and explaining policies.</p> <p>TV content will be updated by the end of March.</p> <p>Plan to look into installation of a self-check in screen, which will be optional for patients to use. It is hoped this could also display waiting times for appointments.</p>

Priority area 2

Description of priority area: Appointment system on-line. Patients are able to book doctor appointments on-line, but would also like to be able to book nurse appointments.

What actions were taken to address the priority?

On-line booking has been advertised and patients are signed up to use it. The system is enabled for patients to book doctor appointments. Any appointments booked are able to be cancelled on-line. It is not currently possible to allow nurse appointments to be booked on-line, as there are too many variables involved and the current clinical system does not support this. Discussions continue with a view to changing to a new clinical software provider which would appear to have more functionality. It is hoped this will be achieved by the end of the summer.

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

Vision on-line services are currently advertised via posters in waiting room and on the web site.

Should we migrate to a new clinical system, this will be advertised further.

We will also advertise this in different languages, to reflect our patient population and consider whether it is possible to incorporate alternative languages into the on-line appointment system.

Priority area 3

Description of priority area: Premises and Access.

What actions were taken to address the priority?

Decorating of waiting areas, update of rooms to include new handwash basins and elbow operable mixer taps. Lighting outside the surgery and within the porch way updated. Gradual replacement of chairs. General upkeep and decorating.

Doors are heavy to open, but we do have an intercom for patients to use should they need help accessing the surgery. PPG would like Practice Manager to look into automated doors, using a push button or sensor and information/costs with regards to this will be brought to the next PPG meeting.

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

Lighting outside has made the area safer and the environment is cleaner and brighter.

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):

Lisle Court has an active group of patients in the PPG.

Facilities have been improved.

Surgery doors have been replaced; disabled access and toilet facilities have been implemented.

A blood pressure machine was installed in the waiting room and this is accessible to patients, and many find it reassuring to be able to check their blood pressure as and when they wish.

The Practice shares information and policies through its website, patient posters and TV content.

Staffing has evolved, and is constantly being reviewed. New positions of both Nurse Practitioner and Health Care Assistants have been filled over the last year.

4. PPG Sign Off

Report signed off by PPG: YES

Date of sign off: 30.3.15

Has the report been published on the practice website? YES

How has the practice engaged with the PPG:

How has the practice made efforts to engage with seldom heard groups in the practice population? Staff continue to ask patients if they would be interested in attending meetings, or offering feedback (see previous section)

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

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? It is continually reviewed and ongoing improvement.

Do you have any other comments about the PPG or practice in relation to this area of work? No