

Annex D: Standard Reporting Template

Cheshire, Warrington & Wirral Area Team
 2014/15 Patient Participation Enhanced Service – Reporting Template

Practice Name: Broken Cross Surgery

Practice Code: N81632

Signed on behalf of practice (type name): L Barrett Date: 30.03.2015

Signed on behalf of PPG (type name): G Gray Date: 30.03.2015

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, Telephone											
Number of members of PPG: 7											
Detail the gender mix of practice population and PPG:					Detail of age mix of practice population and PPG:						
%	Male	Female									
Practice	51	49	%	<16	17-24	25-34	35-44	45-54	55-64	65-74	> 75
PRG	1	6	Practice	20	9	17	15	17	10	7	5
			PRG				2	2	2	1	

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	4276 (75%)				31 (1%)			
PRG	7 (100%)							

	Asian/Asian British					Black/African/Caribbean/Black British			Other	
	Indian	Pakistani	Bangladeshi	Chinese	Other Asian	African	Caribbean	Other Black	Arab	Any other
Practice	295 (5%)					4 (1%)			31 (1%)	
PRG										

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:

Two members of our PPG have spent time in the surgery promoting the PPG and seeking to recruit new members, unfortunately without success. It is proving extremely difficult to recruit and retain members and we understand this is a national issue, not just at Broken Cross Surgery.

We will continue to promote throughout 2015-2016 and in the meantime, we welcome comments and suggestions through our website and feedback slips in the waiting room.

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:

2. Review of patient feedback

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

- GP Patient Access website
- Practice website
- Complaints
- Targeted Questionnaire
- Friends and Family Test
- General verbal feedback at reception desk or during appointment

How frequently were these reviewed with the PRG? At quarterly meetings

3. Action plan priority areas and implementation

Priority area 1
Description of priority area: GP Appointments
<p data-bbox="203 512 887 544">What actions were taken to address the priority?</p> <p data-bbox="203 587 2045 842">In January 2014, we introduced GP triage which meant that a GP would speak to all patients who needed to be seen urgently on the day or sooner than the next available routine appointment. Patients, GPs and staff were in favour of this service. However, as demand for GP appointments rapidly increased throughout the year this led to more people being placed on the triage list. This was further exacerbated by the practice not being allocated it's maximum quota of ST doctors which led to fewer surgeries and fewer appointments being available. Whilst the problems of underfunding, dwindling GP numbers and increasing waiting times to obtain a GP appointment have appeared in the media and will continue to grow without further investment into primary care, the practice was forced to review patient access as the GP triage system became unsustainable.</p> <p data-bbox="203 882 2018 1026">The GP triage system ended in January 2015 and was replaced by the Emergency Access Clinic which allows same day access to all patients for emergency problems without the need to speak to a GP first. This is less popular than the GP triage system as patients are seen in order of arrival and may experience a considerable wait if demand is excessive. However, the majority of feedback is positive and most patients continue to remain happy with the services provided at Broken Cross.</p>
<p data-bbox="203 1145 1312 1177">Result of actions and impact on patients and carers (including how publicised):</p> <p data-bbox="203 1217 344 1249">As above.</p>

Priority area 2

Description of priority area: Reducing the number of wasted appointments due to patients not attending or cancelling scheduled appointments (DNA).

What actions were taken to address the priority?

At the suggestion of the PPG, a monthly DNA poster is now displayed in the waiting room showing the number of missed appointments during the month. This was found to be useful by patient and staff and a further suggestion was that the information should also include the number of surgery hours lost per month. It was felt this would mean more to patients than just the number of missed appointments.

It is too early to assess whether this has helped to reduce the number of DNAs but patients are obviously becoming more aware as the DNA posters generate discussion amongst patients and staff.

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

As above.

Priority area 3

Description of priority area: To 'grow' the Patient Participation Group.

What actions were taken to address the priority?

As mentioned previously, two members of our PPG have spent time in the surgery promoting the PPG and seeking to recruit new members to the group. We will continue to do so with the aim to increase the number of participants.

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

As above

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):

Generally, we have found that patient priorities remain unchanged year on year, eg getting an appointment, being able to see the Dr of choice, length of time waiting in reception to see a GP. We continue to review and make improvements in the face of increasing demand and feel the changes we have made facilitate this.

Last year the practice introduced methods to improve telephone access. Prior to this, patients were often asked to call back to book appointments that were embargoed to open on a specific day thus requiring one (or several calls to the practice). We changed our appointment system to ensure patients only had to contact the surgery once to make an appointment. Patients can also book on-line if they prefer. This remains unchanged and patients are never asked to call back to make an appointment.

The PRG asked that we reinstate chairs of varying heights to the waiting room. When we looked into this, we found that some of the varying height chairs had been removed and placed elsewhere in the building. We now review this on a quarterly basis to make sure the chairs do not go walkabout .

4. PPG Sign Off

Report signed off by PPG: **YES**

Date of sign off: 30th March 2015

How has the practice engaged with the PPG:

- The practice has engaged with the PPG by face to face meetings, Email and telephone

How has the practice made efforts to engage with seldom heard groups in the practice population?

- Two members of our PPG have spent time in the surgery promoting the PPG and seeking to recruit new members, unfortunately without success. It is proving extremely difficult to recruit and retain members and we understand this is a national issue, not just at Broken Cross Surgery.

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

- GP Patient Access website
- Practice website
- Complaints
- Targeted Questionnaire
- Friends and Family Test
- General verbal feedback at reception desk or during appointment

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?

- Same day access for urgent medical problems
- Addressing persistent DNAs
- Commitment to encourage a wider membership of the PPG

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

- We would like to thank our PPG members for their time and efforts spent in attending meetings at the practice and the wider Waters Green Patient Reference Group. We are happy to continue to meet regularly with our PPG and will do our best to encourage a wider membership.