Annex D: Standard Reporting Template

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

Practice Name: St Albans Medical Centre

Practice Code: H84033

Signed on behalf of practice: Dr J Parrish Date: 30th March 2015

Signed on behalf of PPG: Date: 30th March 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 and annual questionnaire from patients visiting the surgery

Number of members of PPG: Face to Face members are 2 Numbers participating in questionnaire are 100

Detail the gender mix of practice population and PPG:

%	Male	Female
Practice	50%	50%
PRG	0%	100%

Detail of age mix of practice population and PPG:

%	<16	17-24	25-34	35-44	45-54	55-64	65-74	> 75
Practice	1403	467	657	909	1077	773	580	561
	(22%)	(7%)	(10%)	(14%)	(17%)	(12%)	(9%)	(9%)
PRG	0	0	0	0	0	0	100%	0

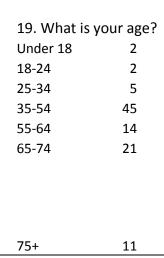
Detail the ethnic background of your practice population and PRG:

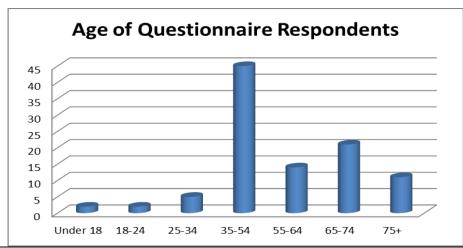
	White			Mixed/ multiple ethnic groups				
	British Irish Gypsy or Other \		White &black	White &black	White	Other		
			Irish traveller	white	Caribbean	African	&Asian	mixed
Practice	4010	106	0	966	52 (0.81%)	22 (0.34%)	1	284
	(62.52%)	(1.65%)		(15.06%)			(0.02%)	(4.43%)
PRG	2	0	0	0	0	0	0	0

		Asian/Asian British					Black/African/Caribbean/Black British			Other	
	Indian	Pakistani	Bangladeshi	Chinese	Other Asian	African	Caribbean	Other Black	Arab	Any other	
Practice	200 (3.12%)	35 (0.55%)	20 (0.31%)	151 (2.35%)	240 (3.74%)	76 (1.18%)	30 (0.47%)	12 (0.19%)	1 (0.02%)	208 (3.24%)	
PRG	0	0	0	0	0	0	0	0	0	0	

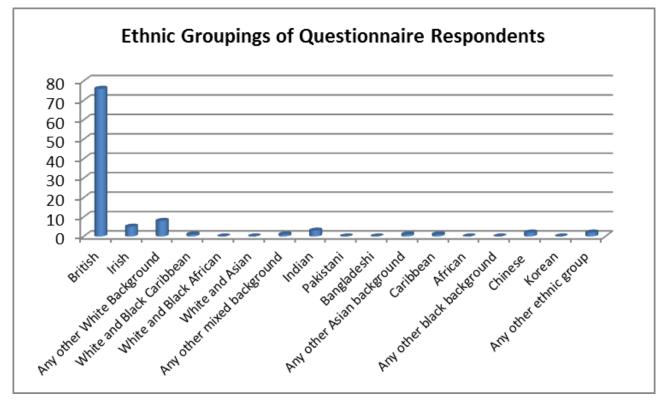
Describe steps taken to ensure that the PPG is representative of the practice population in terms of gender, age and ethnic background and other members of the practice population:

The patient demographics in terms of ethnicity is not diverse with White British or White making up 77.58% of the population. In terms of age and apart from the under 16s the highest numbered age group is in the range 45-54. To reach this group in particular and especially to gauge their support or otherwise for our projects, we conducted an in surgery questionnaire over a two week period in December 2014. The ethnicity and age results for this are as follows:





21. What is your ethnic group?	
White	
British	76
Irish	5
Any other White Background	8
Mixed	
White and Black Caribbean	1
White and Black African	0
White and Asian	0
Any other mixed background	1
Asian or Asian British	
Indian	3
Pakistani	0
Bangladeshi	0
Any other Asian background	1
Black or Black British	
Caribbean	1
African	0
Any other black background	0
Chinese or other Ethnic Gro	oup
Chinese	2
Korean	0
Any other ethnic group	2



2. Review of patient feedback

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



This has been detailed in the attached document.

We researched the sources outlined in the specification namely:

NHS Choices feedback; Practice questionnaire results from 2013-14; Practice PPG Action Plan from 2013-14; Kingston Healthwatch information and data; National GP Survey results from 2013-14

Once we had decided on possible areas for improvement projects we then conducted research into those areas – bowel cancer screening, level of knowledge of out of hours services and use of technology in general to improve the patient experience (EPS usage, On line services etc)

How frequently were these reviewed with the PRG?

These were reviewed at each meeting – 11th November 2014 and 21st January 2015. Notes were taken and distributed to all group members by the PPG lead.

Extract of Notes from the 11th November Meeting

2 PPG and the future

The practice was placing emphasis on:

The search criteria for NHS Choices website

Practice Questionnaire

Healthwatch

On line access to medical records

Communicating with patients ie text reminders to help eliminate the no-show appointments. Perhaps put up a notice giving the number of missed appointments each week?

Other objectives included:

Newsletter/website awareness

Practice opening hours

On line appointment booking/repeat prescriptions

Screening opportunities eg bowel cancer (postal for 60-69 year olds

Cervical cancer for women between 25 and 64

Breast cancer for those between 50 and 70 and can be extended on request

Annual medical check up for patients over 75

NHS heath check for those between 40 – 74

Aortic screening for men

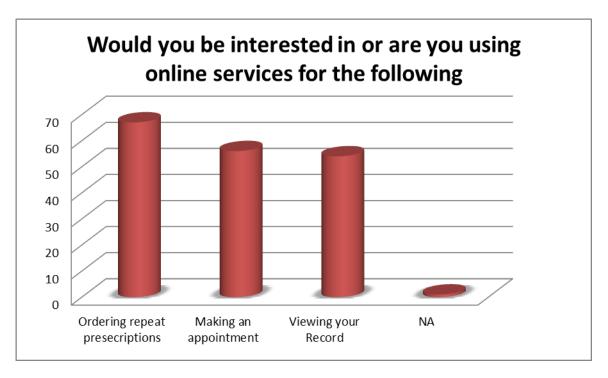
3. Action plan priority areas and implementation

Priority area 1

Description of priority area: On Line services – encourage greater use of on-line services in general to include on line appointments and repeat prescriptions and more awareness of the new Electronic Prescribing Service.

What actions were taken to address the priority?

The use of technology was included in the practice questionnaire and results were as follows:



Uses of these services were monitored in year. Electronic Prescribing commenced in the second half of the year so has been less easy to measure in terms of improvement.

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

The on line service – VOS – has been accessed by an additional 219 patients in the 2014-15 year. Current registration figures are as follows:

Active	242
Created	266
Registered	19
Grand Total	527

In 2013-14 year only 14 patients had accessed the service, although more were registered.

The use of technology is generally useful for patients as it enables them to have greater access to services in terms of time and place of access. This is particularly helpful to those of working age or who cannot contact the surgery in day time because of carer commitments.

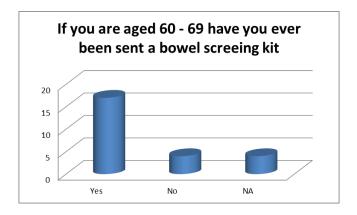
The services are advertised through word of mouth in reception, through literature given to new patients, on posters in the waiting area and on the website.

Priority area 2

Description of priority area: Improving uptake of cancer screening – bowel, breast and cervical Although we originally discussed all three types of cancer screening in the surgery the main emphasis has been on bowel cance screening.

What actions were taken to address the priority?

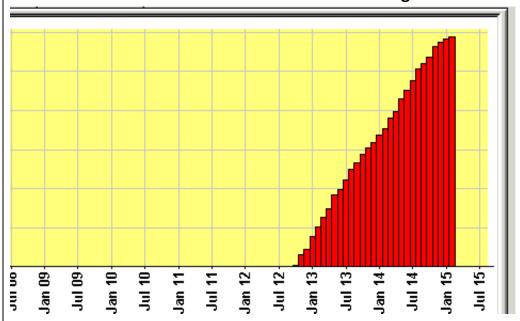
Awareness of this screening service was included in the patient survey and the results are as follows:



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

A chart from the clinical computer system shows that there has been a gradual increase in take up since the beginning of 2013 so we are using this priority area to build on this.

Patients who have attended for Bowel Ca screening



The results of the questionnaire and statistics will be published on the website and in the waiting area. We can also ensure that we continue to display the advertising materials which are sent to us by the service.

The PRG are positive about improving and maintaining the take up of this and other cancer screening services.

Priority area 3

Description of priority area: Continuing to promote the various alternative services available out of hours. This has been an ongoing action from previous years and has been continued in order to incorporate changes.

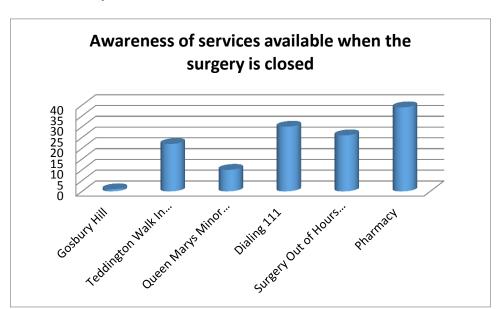
What actions were taken to address the priority?

Awareness of out of hour's services was included in the Practice Survey. The results are as follows:

Services available when the surgery is closed

4. Are you aware of or have you used any of the following services out of hours?

services out or mours.	
Gosbury Hill	1
Teddington Walk In Centre	22
Queen Marys Minor Injuries	10
Dialing 111	30
Surgery Out of Hours Service	26



Pharmacy 39

In addition there has been nationally available advertising material to reduce A&E visits and locally available literature to advertise extra winter pressure clinics'. Both of these have been on display in the surgery.

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

This aspect was last covered by the PPG in the 2012-13 survey where the question had fewer choices – out of hours service, local GP led clinic and Minor Injuries Treatment Centre. Inclusion of newer initiatives such as dialling 111 and use of a pharmacy, show how much of an impact these services have had on patient awareness. The impact has therefore been confirmation of the success of the local and national advertising campaigns to raise awareness.

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 shown in the action plan from 2013-14

Action Plan for 2013-14

The analysis of the questionnaires therefore leads on to the actions required and the action plan is as follows:

Theme	Task	Responsibility	Timescale	Outcome
Access to on- line appointments and ordering of repeat prescriptions	Actively promote the new on- line services in the following ways: Advertise in waiting area Forms at Reception Desk Notes on prescriptions New patients (this process is already in place) Website Recall Letters Where we have email addresses already, email out to patients inviting them to register	Practice Manager and Deputy, Project Lead and Reception Lead	Ongoing work to start April 2014	Monitor and publish monthly uptake in the waiting room and on the website
Practice Newsletter	Discuss the viability of the newsletter with the Patient Group Keep it and make it more regular and publish more copies Publish it on the website OR consider replacing with a virtual newsletter only	Patient Group in conjunction with the Practice Manager and Deputy Practice Manager	Add to agenda of next Patient Group (7 th May 2014)	According to decision of Patient Group
Website	Continue to promote the website more actively Add to headed paper Advertise in the surgery	Practice Manager and Deputy Practice Manager	July 2014	Monitor hits on the website
Practice Opening Hours	Use the website and other forms of advertising (TBA) to re-emphasise the surgery opening hours	Practice Manager and Deputy Practice Manager	July 2014	Repeat the question and measure in next questionnaire
Documentation about patient conditions	Clinicians to ensure that patients are given or told how to access documentation about their condition (if appropriate)	GPs and Practice Nurses	July 2014	Repeat the question and measure in next questionnaire

5. PPG Sign Off

Report signed off by PPG: YES/NO

Date of sign off: 30th March 2015

How has the practice engaged with the PPG:

We have met twice in the year. The group has been reduced this year for a variety of reasons and it will need revisiting in 2015-16. It may also be more beneficial to engage some group members through electronic means such as email.

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

The demographic makeup of the active patient group has traditionally been older patients. The ethnic breakdown also shows the population is largely White British or Other White. The 'missing group' is therefore younger patients and we try to address this gap by offering the questionnaire.

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

The chair of the patient group has been attending the CCG wide Patient Forum so has been able to feedback to the group from that forum.

Was the PPG involved in the agreement of priority areas and the resulting action plan?

Yes – the suggested areas were discussed in the meeting and the group also contributed their own ideas.

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

There has been an improvement in awareness around the out of hours areas and in the use of technology in general. The cancer screening element is still in the early stages but should be included next year to show year on year change.

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

None