

Annex D: Standard Reporting Template

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

Practice Name: Cogges Surgery

Practice Code: K84618

Signed on behalf of practice: Dr Douglas Date: 20/3/15

Signed on behalf of PPG: Email agreement received from 4 members of group 19/3/15

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,													
Number of members of PPG: 7 (has recently dropped from peak of 11)													
Detail the gender mix of practice population and PPG:					Detail of age mix of practice population and PPG:								
%	Male				%	<16	17-24	25-34	35-44	45-54	55-64	65-74	> 75
Practice	49%				Practice	23%	9%	11%	16%	18%	10%	6%	7%
PRG	15%				PRG	0%	0%	0%	0%	0%	29%	29%	42%

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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	*35.7% (>90% estimate for all)	0.2%	0%	2%	0.1%	0.1%	0.1%	0.1%
PRG	100%	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	0.3%	0.1%	0.1%	0.4%	0.5%	0.1%	0%	0.1%	0%	0.3%
PRG	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%

*NOTE: 60% of patients have not provided their ethnic background. Of the patients who confirmed their ethnic background, 89% selected White British. The practice is predominantly White British and it is calculated that for the entire population the figure would significantly exceed 90% White British if all patients agreed to confirm their ethnic background.

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:

Efforts have been made to attract younger adults to the group, and the meetings are held in the evenings to encourage this, however the feedback we received when inviting them to become involved was that many in this age group have children and are unable to attend due to these and other commitments. Every September we advertise the PPG to the local secondary schools and colleges and this has resulted in Year 8 students (who are interested in health related careers) joining the PPG in the past, although they tend to remain for only one year before

leaving for university.

Approximately 8% of our patients do not live in Witney town and it is therefore pleasing to see that 2 members of our PPG live in a village and therefore may be able to provide a view on issues that are specific to rural living, that patients living in Witney may be unlikely to consider.

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:n/a

2. Review of patient feedback

Outline the sources of feedback that were reviewed during the year:
Comments received from patients via postbox in waiting room. An email address for the Patient Group was set up and advertised in the practice leaflet, website and in the waiting room, however no emails were received.

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

3. Action plan priority areas and implementation

Priority area 1

Description of priority area: recruitment of younger members to be targeted as part of a 'membership drive' and awareness raising exercise.

What actions were taken to address the priority?

Agreed that the PPG and Practice would undertake a membership drive: ideas for further discussion at next meeting e.g. tea party, new posters, explore possibilities to link into Blake School, Cogges Farm and Community Gardening events.

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

Progress so far:

Local primary school have confirmed that PRG members can have stall at upcoming fair to recruit new members.

Priority area 2

Description of priority area:

Online appointments misuse: concerns that some patients are booking appointments on a regular basis 'just in case they need to see a GP' and cancelling them online at last moment, thus depriving other patients of opportunities to book routine appointments who actually do have need to see GP.

What actions were taken to address the priority?

Practice to audit this and bring results to future PRG meeting for further discussion.

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

Not known yet – it is anticipated that patients who have been doing this will be identified and the reasons for their behaviour

discussed with them. This may result in offering education or alternative systems for patients to ensure that this is behaviour is not repeated inappropriately.

Priority area 3

Description of priority area:

Concern that on some days patients can be waiting to be seen considerably after their booked appointment time.

What actions were taken to address the priority?

Practice will hold a Team Away Day and the focus will be on patient access including appointment scheduling and management of unplanned patient demand.

Practice to review information sheet entitled "Why surgeries run late" which is available to patients in waiting room explaining some of the reasons why this can happen.

Dr Hallett trial of 15 minute routine appointment is underway and will be reviewed after 3months – results will be brought back to PRG.

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

Improved information available to patients explaining why surgeries may run late – available in waiting room and website.

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):

Patient Online Access has been promoted to support patients who are keen to order their repeat prescriptions online and book GP appointments.

4. PPG Sign Off

Report signed off by PPG: YES (4 members confirmed agreement via email)
Date of sign off: 19/3/15

How has the practice engaged with the PPG:

Regular meetings held quarterly with PPG, GP and practice manager, plus other practice staff attending occasionally.

How has the practice made efforts to engage with seldom heard groups in the practice population? Invites sent to local secondary schools and colleges to recruit younger members; health visitor and midwife requested to suggest involvement to patients with younger families.

Has the practice received patient and carer feedback from a variety of sources? Yes - Postbox for comments in waiting room is well used, email address for Patient Group is promoted in patient leaflet, website and in waiting room.

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? Clearer information available to help patients understand why there may be delays in being seen.

Do you have any other comments about the PPG or practice in relation to this area of work? The similarities and differences between the PPG DES, NHS Choices patient feedback/reviews and the Friends and Family Test has caused some confusion as patients can be unclear what exactly happens to their message if they post it via the different feedback models.

The required breakdown of categories of ethnicity do not fit into the categories used in the 2001 Census which our clinical system EMIs Web uses to record Read Codes, which means that the data is not easily available in the format requested on the template.