

Patient Panel Group Report 2016-17

Practice Name: West Heath Surgery

Practice Code: M85007

Signed on behalf of practice:

Date: 25.03.17

Signed on behalf of PPG:

Date: 25.03.17

1. 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) The PRG has opted to take a virtual form using electronic communication to discuss views and ideas in order to maintain communication when meeting is not possible and to allow meetings to take place adhoc when required for important topics requiring face to face discussion. The practice keeps all communication sent by the PRG. The practice will meet at least annually to discuss activity from the previous year and set priorities for the following year.
Number of members of PPG: 8

Detail the gender mix of practice population and PPG:

	Male	Female
Practice	49.5%	50.5%
PPG	50%	50%

Detail of age mix of practice population and PPG:

	<16	17-24	25-34	35-44	45-54	55-64	65-74	>75
Practice	23%	10%	19%	13%	13%	10%	7%	5%
PPG	0%	0%	12.5%	37.5%	12.5%	12.5%	12.5%	12.5%

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	65.5%	0.06%	0.01%	0.17%	0.96%	0.32%	0.29%	0.36%
PPG	50%	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	Any other
Practice	1.14%	0.65%	0.09%	0.66%	1.82%	2.2%	0.2%	0.51%	(not stated)
PPG	0%	0%	0%	0%	0%	0%	0%	0%	50% (not stated)

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:

From the statistics above, it can be seen that the panel is fairly representative of the practice's patient population. The practice recruited two new male patients to the panel which has made the group much more representative of gender. The practice feels that the PPG is representative of the ages of our population, but may want to recruit a younger panel member next year. The ethnicity difference is also within the tolerance of one patient member in each category.

**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.**

No

Review of patient feedback

The patient panel reviewed the results from the national GP patient survey. Please follow the link below.

<https://gp-patient.co.uk/report?practicecode=M85007>

The patient panel also reviewed the outcome of the Friends and Family survey which were positive. 97% of patients would be either extremely likely or likely to recommend the practice to a friend or family member. This is an ongoing survey with patients from the practice and also patients who use the extended access scheme.

2. Action plan priority areas and implementation for 2016-17

Priority area 1
<p>Description of priority area:</p> <p>Surgery phone system welcome message</p>
<p>What actions were taken to address the priority?</p> <p>Some members of the patients panel stated that they sometimes felt uncomfortable being asked the reason for an appointment by a receptionist, but understood why this was the case. The surgery displays a poster on the board in the waiting area to advise patients of the reasons that receptionists ask the reason for appointments.</p>
<p>Result of actions and impact on patients and carers (including how publicised):</p> <p>The panel understood that the questions asked by the receptionist were not meant to be intrusive to the patient. It was agreed that the phone message would be changed to advise patients that they will be asked for a reason for the appointment and to advise that staff are fully trained in the rules around patient confidentiality. Providing this information to patients on the welcome message should make them feel more comfortable when discussing personal problems with the reception team</p>

Priority area 2

Description of priority area:

Expand the number of services available at the practice and keep the existing 7 days services running

What actions were taken to address the priority?

The practice felt that there should be more appointments available to patients with a wider range of clinicians within the practice, given the pressure on the current GPs in the practice and the shortage of GPs and subsequent recruitment difficulties faced by the NHS. The management team therefore completed a bid to gain funding for other members of clinical staff. The management team also engaged with the commissioners to confirm the continuation of extended access clinics.

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

The panel were advised that the practice had recently won a bid to recruit a clinical pharmacist into the practice team. The clinical pharmacists are able to deal with minor ailments and perform medication reviews, as well as help with the administrative burden placed onto the GPs. Two pharmacists had been employed and were ready to join the team. The managing partner confirmed that the extended access clinics had been commissioned for another 12 months.

Priority area 3

Description of priority area:

Minor Surgery Appointments

What actions were taken to address the priority?

As the practice list size has increased, the demand for minor surgery had increased, and patients were being placed on a waiting list. The demand had previously been met with one clinic per month. The practice will look to increase the number of clinics held at the practice.

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

The practice utilised the skills of existing staff and locum GPs to provide more joint injections within normal clinics, therefore allowing for more complicated procedures to be performed in the minor surgery clinics. The practice increased the number of minor surgery clinics to 2 a month to clear the waiting list. The practice also upskilled the practice nurse so that she could provide a cryotherapy, again, outside of the minor surgery clinic.

Priority area 4

Description of priority area:

Pharmacy service based at the practice

What actions were taken to address the priority?

The patient panel had shown an interest in having a reliable pharmacy attached to the practice. The management team investigated this and discovered that this may be possible in the future. The pharmacy could work with the local practices and be integrated into the patient app so that the prescription was trackable and patients would be able to see when their prescription was ready. This would also reduce the risk of prescriptions going missing.

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

The management team addressed this with the My Healthcare federation and this will be a service that the federation looks to provide in the future with the agreement of some of the practices in the federation.

Priority area 5

Description of priority area:

Extend the physiotherapy service and reduce waiting times

What actions were taken to address the priority?

The patient feedback from the physiotherapy service was excellent, however, the clinic was only provided 2 days a week. The management team worked with the commissioner and the local community trust to extend the physiotherapy clinics held at the hub. The extended physiotherapy service was commissioned to start in October 2017, with planned expansion of the service across the federation.

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

The extended physiotherapy service means that patients will no longer have to travel to a community hub to receive treatment and there should be a significant reduction in waiting times. The practice is aware that the sooner intervention is received and treatment is started, the better the outcome for the patient. The management team has also been working with the My Healthcare federation to further extend the MSK service in the practice to include specialist practitioners and consultants, however, nothing has been finalised yet.

Priority area 6

Description of priority area:

Staff name badges

What actions were taken to address the priority?

The practice previously introduced staff name badges to make the reception team more identifiable to patients, however, the badges displayed the full name of the staff members. The patient panel felt that this was not appropriate and would appear friendlier and more approachable to patients if only the first name was displayed on the badge.

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

The management team agreed to replace the name badges for the reception team to display only the first name.

3. Progress on previous years

Outline progress made on issues raised in the previous year(s):

In the year 2015/16 the PPG looked at the following priority areas:

- Macmillan Value Based Standard
- Patient communication when clinicians are running late
- Access to medical records
- Information on self-management of conditions
- Patient call system
- Further management of patient wasted appointments
- More secondary care services to the practice

The outcome of all of the actions carried out during the year can be found in the patient panel report from 2015/16 which can be found at the link below:

<http://westheathsurgery.co.uk/about-us/patient-panel/>

5. Progress on previous years

New Action Priorities for 2017-18

It was decided that the actions for 2017-18 would include:

- Continue to provide extended access 7 day a week opening
- Use the 18 new consulting rooms to allow further clinicians to work at the practice and introduce more services.
- Expand the capabilities of the patient app to include more booking features and more self-care information

4. PPG Sign Off

What else does the practice do to engage patients other than have a patient panel? Does this include the views of all patient groups?

The practice has a number of methods of receiving views of patients and these are normally collated and brought to the patient panel for discussion. These methods include uses of suggestion boxes, patient surveys for specific projects, informal feedback to reception staff and in consultations, audit of clinical records, review of complaints and compliments, friends and family test, team meetings regarding significant events amongst others. The practice will periodically look to gain focused understanding from those that have received specific services at the practice, particularly the new services we mobilise or those that we are looking to change.

The practice aims to collect information by a number of channels whether verbal, written or electronic in order to increase the patient convenience of engagement with the practice.

The practice accepts observations and suggestions from all patients regardless of their age, disability, gender, marriage and civil partnership, pregnancy, race, religion or belief and sexual orientation. The practice also tries to gain comments from those that don't often comment such as those with mental health issues, those that are carers, homeless, etc.

The practice always looks to improve its method of collecting patient feedback and would welcome suggestions and examples of good practice from any source.