

Annex C: Standard Reporting Template

Hertfordshire and South Midlands Area Team
2014/15 Patient Participation Enhanced Service – Reporting Template

Practice Name: Pastures Way Surgery

Practice Code: E81076

Signed on behalf of practice:

Date: 24/3/15

Signed on behalf of PPG:

Date: 24/3/15

[Signature]
Mohammed Adam

[Signature]
J/JI MASTERS

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) Regular face to face PPG meetings

Number of members of PPG: 13

Detail the gender mix of practice population and PPG:

%	Male	Female
Practice	2118	2187
PPG	8	5

Detail of age mix of practice population and PPG:

%	<16	17-24	25-34	35-44	45-54	55-64	65-74	> 75
Practice	1182	396	580	693	582	335	253	225
PPG			1	1	4	4	2	1

Date:

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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	200	7		181	32	13	18	28						
PPG	4	1												
	Asian/Asian British					Black/African/Caribbean/Black British			Other					
	Indian	Pakistani	Bangladeshi	Chinese	Other Asian	African	Caribbean	Other Black	Arab	Any other				
Practice	310	361	89	8	150	158	182	20		68				
PPG	5	1					2							

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:

- a) **Luton and Dunstable hospital is very close to our practice and a significant number of employees of the hospital are our practice patients therefore 2 of the PPG members are hospital employees.**
- b) **There is Better Together a stepping stone home for patients with chronic mental health problems adjacent to the surgery-all the in patients are registered with our surgery. The carers normally accompany these patients when they are reviewed. We have approached the home to ask one of the carers/managers to be part of our group in the future.**
- c) **The practice has a large number of patients with Diabetes Mellitus. Our practice prevalence for diabetics is one of the highest in the Luton GP practices (7.5%). One of the PPG members is a diabetic and is proactive in the self-management of the condition.**
- d) **The practice has a high number of elderly population and therefore we have 3 members >65 years age.**

2.Review of patient feedback

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

MORI polls statistics-**see minutes of the meetings** –

In-house GPAQ survey – **see attached survey results**

Health Watch survey-refer to the survey – **discussions in the PPG and the outcomes achieved**



Package

How frequently were these reviewed with the PRG?
MORI, Health Watch and GPAQ - **all reviewed once in the year.**

2. Action plan priority areas and implementation

Priority area 1
<p>Description of priority area:</p> <p>See Health Watch survey action plan</p>
<p>What actions were taken to address the priority?</p> <p>See PPG (July 2014) minutes and Healthwatch action plan-outcomes</p>
<p>Result of actions and impact on patients and carers (including how publicised):</p> <p>PPG minutes are placed in the practice reception on the notice board and website.</p> <p>Bought portable hearing T loop device now in place.</p> <p>Bike stands have been installed.</p> <p>The baby change facilities have been installed in the disabled toilet.</p> <p>We are getting quotations for the surgery front door modifications. This project may get incorporated with building extension application programme-if approved</p> <p>Better consultations with patients with hearing difficulty. Lot of these patients have appreciated this new facility.</p> <p>Bike stands are being used and getting good verbal feedback from patients.</p> <p>New facilities information is on the LED screen</p>

Priority area 2

Description of priority area: **Educate patients regarding appropriate use of the A/E, OOH services, in-house services and medication management.**

What actions were taken to address the priority?

- **Shared the A/E survey with PPG group. Developed pathways eg. Receptionists calling each patient who attended A/E –work still in progress.**
- **Started giving a credit card sized information to patients to put in their wallet/purse with information of alternatives to A/E.**
- **Started quarterly practice newsletter.**
- **Installed reception area LED screen with practice information including those alternatives to A/E, surgery opening times etc.**
- **Reviewed the surgery DNA policy with the PPG group. Agreed our current action plan with the PPG group.**
- **Luton CCG Medicines Management team attended one of our meetings. The PPG agreed with the new Luton CCG directive to stop pharmacies ordering managed repeats for patients (with the exception of the vulnerable and housebound)**
- **PPG have agreed with the practice policy to inform patient who are outliers with respect to the practice area, to find local GP service.**

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

- **Raised awareness for patients to think of an alternative to going to A/E. Questionnaire and survey helped the patients to reflect on their A/E and OOH attendance. The Luton and Dunstable employees are in the process of liaising with the hospital communications team to raise awareness of the hospital employees not to use A/E as first port of call and go via their GP services instead.**
- **Less notices on boards. Better information on the LED screen. The patients are very impressed with the information-lots of verbal comments of approval. The actual impact on A/E attendances are yet to be quantified.**
- **DNA policy has affected a number of patients- they have received letters to explain their non-attendance - for those who repeatedly offend, warnings are given and then if no impact they are deregistered. Hopefully patient behaviour will change in future. There is improved access for those patients seeking appointments at the surgery.**
- **The e-mail address for repeat prescription ordering is being used by the patients – pastureswaysurgery.prescriptions@nhs.net**
- **The new managed repeat prescription system implemented by Luton CCG and approved by our PPG has been implemented from 1st March 2015.**
- **Having lost some practice area outlier patients, and the practice continuing to register more local patients, this is helping us design local services for the elderly and the frail within our cluster work group.**

Priority area 3

Description of priority area: **Improve access for the patients and extend surgery premises to accommodate more patients and develop phlebotomy and other services at the surgery.**

One staff member has completed phlebotomy training. Premises extension application was put in during the year. This was rejected. New application has been sent with PPG approval and recommendations.

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

The surgery is currently providing phlebotomy services for some patients on one day a week. This service will gradually increase with room availability.

The successful buildings extension application would bring in lot of new services for the patients:

- **Outreach phlebotomy service for hospital staff to use**
- **Host Wellbeing Counselling services**
- **Host social service facilities for patients- e.g. advice on personal independence plans, work capacity reviews, or working parents guidance, psychiatry social worker services etc**
- **Host OOH service for the Luton West area.**
- **In house Pharmacy which would provide minor illness, chronic disease, travel, contraception MURs etc.**
- **Provide in-house physiotherapy.**
- **Accommodate for the anticipated increase in the practice patient population. There is a new housing development going ahead on the border of Lewsey Farm for 1150 new homes.**

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):

Not Applicable

3. PPG Sign Off

Report signed off by PPG: YES/NO

Date of sign off:

Has the report been published on the practice website? YES/NO

How has the practice engaged with the PPG:

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

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

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

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

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

Please return this completed report template to england.enhancedservices-athsm@nhs.net no later than 31st March 2015. **No payments will be made to a practice under the terms of this DES if the report is not submitted by 31st March 2015.**