

Derbyshire & Nottinghamshire Area Team

2014/15 Patient Participation Enhanced Service REPORT

Practice Name: Macklin Street Surgery

Practice Code: C81073

Signed on behalf of practice: Anne Armstrong – Business Manager

Date: 11/3/15

Signed on behalf of PPG: Chris Dawson – PPG Chairperson

Date: 11/3/15

1. Prerequisite of Enhanced Service – Develop/Maintain a Patient Participation Group (PPG)

Does the Practice have a PPG? YES / NO Yes
Method of engagement with PPG: Face to face, Email, Other (please specify) Meetings are held bi monthly or more often if required, depending on what subjects need discussing and acting on. Also PPG members are contacted, by the Practice, or in contact by email.
Number of members of PPG: 4

Detail the gender mix of practice population and PPG:

%	Male	Female
Practice	5615	5263
PPG	1	3

Detail of age mix of practice population and PPG:

%	<16	17-24	25-34	35-44	45-54	55-64	65-74	> 75
Practice	1673	1091	2052	1487	1379	1241	938	924
PPG	0	0	0	1	0	0	3	0

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	1496							
PPG	4	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	61	62	8	15	28	29	24	21	3	66
PPG	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 PPG have advertised within the surgeries but there has been little interest. However, we and the PPG are working together looking at other options to engage with other groups within the population. For example, Separate Notice Boards have been erected for the PPG to help provide more information and to generate interest. The PPG have provided the Practice with 'screens' to help deliver information, both on Practice issues and to make patients more aware of the PPG and what it does. These have been well received. Also members of the PPG are periodically available in surgery, at different times of the day, to be able to explain the role of the PPG and to be available for questions from patients. The PPG is also going to assist the Practice to develop the 'Virtual Patient Group' (VPG) as we all feel that this would be another way of reaching other groups within the practice population.

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/NO Yes

If you have answered yes, please outline measures taken to include those specific groups and whether those measures were successful:

Most of the measures to reach specific groups have been by PPG members being in the surgery and when helping at such events as flu clinics and taking the opportunity to speak to patients. This is one area that the Practice and the PPG feels requires more investigation. We and the PPG believe that a practice newsletter will be an invaluable source of keeping patients informed of practice news and should be priority to get it up and running. This could also be a useful vehicle for generating interest from all groups in joining either the PPG or the 'Virtual Patient Group'.

2. Review of patient feedback

Outline the sources of feedback that were reviewed during the year: In 2014 before the family and friends survey the practice ran their own survey on access with questions that included telephone access and appointment time. Some of the data from this survey helped the practice to decide to change the telephone system and to pilot a phone triage system also. The other sources of feedback are; The VPG. the PPG. NHS Choices, feedback on website following a survey done by CCG team on internet use and patients complaints and suggestions to the Practice Manager.

How frequently were these reviewed with the PRG?

The feedback from the survey was shown to the PPG and the data was discussed at the beginning of the reviews of access and their involvement was invaluable in the final decision on the new telephone system. The CCG met with the PPG and shared their results. The practice shares feedback with the PPG at their meetings.

3. Action plan priority areas and implementation

Priority area 1

Description of priority area:

Access - The two areas that were looked at were the Phone System and to run a Phone Triage pilot.

The current phone system is unable to queue calls which results in frustration of patients as they get the engaged tone once all 6 lines are in use.

The patient feedback received indicated a real frustration at being told there were no appointments left and to call back tomorrow at 8.00 am. The system needs to be reviewed to better meet the clinical needs of the patients.

What actions were taken to address the priority?

Discussions with the PPG following feedback on the survey in 2014 identified the need to explore alternatives. Full review of practice needs undertaken and several systems were looked at. The new system was agreed by the Partners and the Practice Team and purchased in November 2014 with full implementation during December 2014.

The patient feedback received indicated a real frustration at being told there were no appointments left and to call back tomorrow at 8.00am. The system needs to be reviewed to better meet the clinical needs of the patients. Extensive research was undertaken at several other surgeries to see how the phone triage pilot could be reviewed. The practice then analysed the type of appointment being used. Using this information a project team worked up a trial model for tackling the triage process more objectively. This commenced with all the patients being called back by a clinician to assess their needs and arrange the most appropriate appointment.

Result of actions and impact on patients and carers: The feedback from several patients about the new telephone system has been all positive (apart from a few teething glitches). Patients feel better informed about where they are in the queue and confident that they will be answered in turn.

Patient feedback about the phone triage pilot was generally good though this did not suit all due to work and personal arrangements meaning difficulty in receiving call backs. System then reviewed and tweaked so that initial assessment is now done by the reception team to direct patients more quickly to the necessary clinician.

How were these actions publicised?

These actions were publicised by poster in the surgery and on the practice website. All patients who called during the pilot were advised of the system. There is now a message that all callers get when phoning the surgery explaining that reception will need to ask them some questions.

Priority area 2

Description of priority area:

Communication - Patient Information Screens, Notice Boards and Feed Back Boxes.

It was felt by the PPG members that there was a lot of information in the patients waiting area and that because of the numerous amounts of posters/leaflets that patients did not actually read the information. After discussion with the PPG and feed-back it was decided that the PPG would donate a screen for both sites, which would give a more up to date way of providing patients with the information the practice needs to share with them.

The PPG asked that there be specific notice boards for; information about the PPG, its role and involvement with the practice and its patients. Display information that could be sourced in different languages and help in getting patients from all groups of the practice population interested in the PPG. Also a board to inform and educate patients in some of the systems of the practice.

The practice has feedback/suggestion boxes in waiting area. PPG have also purchased post boxes for both sites to work in conjunction with their notice boards to enable patients to contact and communicate with them. In addition the PPG has created a direct email address for patients to contact them.

What actions were taken to address the priority?

The PPG members did extensive research into what was the best and appropriate screens, which was then agreed with the partners. The screens were purchased by monies raised from fundraising by the PPG over several years. The PPG along with practice staff agreed what types of information would go on the screens and a rolling PowerPoint display was produced. Two notice boards were purchased for both sites and after discussion with the PPG placed in the most appropriate area to be in full view of the patients. Appropriate signage was done to make the boards more noticeable.

It was decided by the PPG that the boxes should be fitted near the notice boards making the area dedicated to the PPG and its involvement with the practice and its patients.

Result of actions and impact on patients and carers:

It has been noted by staff and feedback that patients in the waiting area are more drawn to the screen. It was agreed that the engaging nature of videos would enable the practice to be able to bring more health promotion information to the attention of the patients. The PPG felt that though some patients may not want to sit on PPG boards they may be willing to help out with a specific task such as translating and that having their own notice boards could be an opportunity to engage with patients from under-represented groups. The boxes in conjunction with the notice boards will enable patients to contact and communicate with the PPG.

How were these actions publicised?

The erection of the screens and notice boards was not publicised prior to being installed as the TV screens took some time to source and install, and it was felt that prior publication would have been of no value to the patients.

Priority area 3

Description of priority area: Building Improvements – The three areas looked at were Decoration, Seating and Security. Patient feedback and suggestions were discussed and agreed by the partnership to look at certain aspects of the building that needed upgrading. The first being the decoration of the waiting room and consulting rooms.

The seating that the practice was using was not compliant with the CQC and they were not made of cleanable material.

Being a city centre practice one of the most important areas is security and we felt that to protect patients and staff alike we needed to look at further security. After general discussion with the PPG the practice looked at options.

What actions were taken to address the priority? All members of staff asked for their suggestions for colours. A combination of the practice colours used for waiting room.

All the needs of the practice population were taken in to account and the durability and infection control of the material before choosing suitable chairs. Full review of the practice existing security was done and it was decided that we needed extra security to cover the building and the perimeter. After further discussion security cameras and extra security lights were purchased in January 2015.

Result of actions and impact on patients and carers: Feedback from patients about the new décor has been good with such comments as ‘ more welcoming and modern space’

Feedback from the patients is that they find the seating comfortable and in keeping with the decoration of the waiting area.

Feedback has shown especially in the darker months that patients and staff feel more secure when entering and leaving the building and when going out to their cars in the car park.

How were these actions publicised? All appropriate signage for informing people that cctv is in use.

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):

We continue to try and improve access for our patients and have had success with our phone triage pilot which has given us further data to use in this ongoing problem. The new telephone system has now been accepted by the patients as it keeps them better informed about where they are in the queue and confident that they will be answered in turn.

4. PPG Sign Off

Report signed off by PPG: YES / NO YES

Date of sign off: 11/3/15

How has the practice engaged with the PPG:

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

The lack of cross patient population participation has been a concern for some time but to date efforts to redress this have been unsuccessful. Other approaches to solving this problem are currently under consideration.

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

The PPG is unaware of any such feedback regarding further engagement of seldom heard groups. However, the Practice has consulted the CCG to gain advice on improvements and a CCG representative has spoken with the PPG.

The Practice has shared feedback it has received at PPG meetings.

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

There was some involvement with the Action Plan.

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

The introduction of the new telephone system has shown that patients have easier lines of contact with the practice. The PPG are aware that the practice monitors appointment availability and there has been some positive results but that the process is ongoing. The introduction of the screens has shown initial evidence that they have contributed to patient education on accessing services appropriately.

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

For some years the PPG's involvement was limited to fund raising and providing support at clinics. It is only in more recent times that there has been more direct involvement in Practice matters. There have been some issues with how the practice and PPG interacted but these have now been resolved. Three long standing members of the original PPG have now left its ranks. The PPG now feels that there is a positive approach between the Practice and PPG and look forward to working with the Practice to improve interaction with patients and services wherever possible.

Please submit completed report to the Area Team via email no later than 31 March 2015 to:

- Derbyshire practices: e.derbyshirenotttinghamshire-gpderbys@nhs.net
- Nottinghamshire practices: e.derbyshirenotttinghamshire-gpnotts@nhs.net