

Patient Participation Reporting Template 2014-2015

Practices are required to submit the patient participation report detailed below.

Please submit an electronic version of this report to england.bgswh-primarycare@nhs.net by **31st March 2015**

If you have any queries, please contact Harriet Gill – england.bgswh-primarycare@nhs.net

Practice details:

Practice code:

Stage one – validate that the patient group is representative

Demonstrates that the PRG is representative by providing information on the practice profile:

Does the Practice have a PPG	YES
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Practice population profile	PRG profile	Difference
Age		
% 18 – 24 – 8.59%	% 18 – 24 - 0%	8.59%
% 25 – 34 – 11.49%	% 25 – 34 – 0%	11.49%

Practice population profile	PRG profile	Difference
% 35 – 44 – 12.72%	% 35 – 44 – 0%	12.72%
% 45 – 54 – 16.05%	% 45 – 54 – 0.346% (4 members)	15.7%
% 55 – 64 – 12.76%	% 55 – 64 – 0	12.76%
%65 – 74 – 9.43%	%65 – 74 -0.589% (4 members)	8.841%
%75 – 84 – 5.37%	%75 – 84 – 0	5.37%
% Over 85 – 2.94%	% Over 85 - 0.47% (1 member)	2.46%
Ethnicity		
White	White	
% British Group -	% British Group -	ALL
% Irish -	% Irish -	nil
Mixed	Mixed	
% White & Black Caribbean -	% White & Black Caribbean -	nil
% White & Black African -	% White & Black African -	nil

Practice population profile	PRG profile	Difference
% White & Asian -	% White & Asian -	nil
Asian or Asian British	Asian or Asian British	
% Indian -	% Indian -	nil
% Pakistani -	% Pakistani -	nil
% Bangladeshi -	% Bangladeshi -	nil
Black or Black British	Black or Black British	
% Caribbean -	% Caribbean -	nil
% African -	% African -	nil
Chinese or other ethnic Group	Chinese or other ethnic Group	
% Chinese -	% Chinese -	nil
& Any Other -	& Any Other -	nil
Gender		
% Male -	% Male -	33%

Practice population profile	PRG profile	Difference
% Female -	% Female -	66.66%

<p>Differences between the practice population and members of the PRG</p> <p>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:</p>	<p>Longlevens Surgery has had a PPG now for some years and we have seen patient representatives come and go. We have grown from around 5 members to our current 9 which is down to word of mouth and ongoing advertisement in our regular newsletter and website. We have tried to encourage those with young children/disability/ethnic backgrounds but to date have found certain groups more difficult to engage with. We will continue to encourage people to join but are conscious of the group not becoming too large as this can then break down the communication.</p>
<p>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</p> <p>NO</p>	
<p>Is the group virtual or face-to-face?</p>	<p>Our meetings are face to face but we have one member who finds it more difficult to get to meetings who offers excellent support, advice and ideas via email. However he was able to attend our last meeting.</p>

How many members are there on the PRG?	9
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Step 2 – Review Patient Feedback	
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Outline the sources of feedback that were reviewed during the year:	<p>We have used our own in house Practice questionnaire this year to gage the views of our patient population. This revised survey sought to provide us with quality feedback that we have used as the basis for our meeting and action plan for the surgery. Friends and Family feedback which started in January 2015 has also been extremely encouraging and this is shared with our patients each month via advertising within the surgery and online. We hope that this will reach as many of our patients as possible. NHS choices Website is also used as part of our review and this was pleasing to see that we had 5 stars awarded from feedback on the site.</p> <p>We welcome any type of feedback from our patients and indeed those that use our service as we strive to improve our care and responsibility to all those that are welcomed through the Surgery.</p> <p>CQC is very much part of our day to day work and the standards we are trying to maintain.</p>
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How Frequently were these reviewed with your PRG	<p>The group have met informally throughout the year on approximately 4 occasions to discuss fund raising and ideas for the practice. The group also helped with decorating the surgery at Christmas.</p> <p>The findings of our patient questionnaire were circulated to them all for comment and then we met formally in February to discuss.</p>
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Priority Area 1 & 2	
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Describe the priory area:	<ol style="list-style-type: none"> To manage the increasing patient numbers wishing to join the practice. This may involve reviewing the boundary area for the practice and or patients living outside. <i>The group were informed that it may be necessary for the practice to</i>
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	<i>consider a review of the patients living outside the Longlevens boundary area – this process has to be dealt with in a very sensitive manner, involving the local Area team of NHS England, our patient group and GP partners.</i>
Why was this priority identified:	Due to the large number of houses currently in construction in Longford Lane the practice has concerns that this will impact on the level of service we are able to offer given the number of patients that may wish to register.
What actions were taken to address this priority	<ol style="list-style-type: none"> 1. We are seeking to cleanse our list 2. We have put in a priority bid for funding to enable us to expand the surgery to cope with the influx of patients in the Longlevens area.
What were the results of the actions and what impact on patients and carers?	<p>Impact on patients that are outside of the area will be they are going to be asked to register at a practice closer to home – they may be unhappy with the Practices decision but we have to consider our patients that are living within boundary.</p> <p>Impact on service for Longlevens surgery if 1000+ patients register here will have massive repercussions on what we can continue to provide with regards to ongoing care. There are a planned 500 houses in progress.</p> <p>The surgery wants to grow and we are asking for funding to be able to do this. A two storey extension will enable the practice to take on additional clinical staff and grow our list to some 10,000 patients.</p>
How was this publicised.	<p>Letters will be sent to individual patients</p> <p>A bid was made to the NHS England team (Priority one and two)</p>

Priority Area 2	
Describe the priority area:	This is priority area one and two
Why was this priority identified:	See one and two
What actions were taken to address this priority	
What were the results of the actions and what impact on patients and carers?	
How was this publicised.	

Priority Area 3	
Describe the priority area:	<p>1. Training and development of Practice staff to include Practice Nurses/GPs and administrative staff – <i>all staff plus our dedicated clinical team need to keep up to date and aware of new pathways or clinical processes. With training or updates we can be sure that we are working within set limits and to strict criteria and our patients can then be seen to have access to the best care and service we can provide.</i></p>
Why was this priority identified:	<p>We have identified this as a particular need as there are many discussions within the Gloucester area with regards to mandatory training and ongoing development for our Practice Nurses which is can then be extended to Doctors and staff. The CCG recognise that training is key to ensuring that our patients are provided with current and safe care. Accessing training that is fully accredited can be difficult so having a streamlined approach and standardised will help considerably.</p>
What actions were taken to address this priority	<p>CCG are in the process of trying to co-ordinate this piece of work</p> <p>In the mean time we have accessed training for our Practice Nurses to include Cytology updates, childhood immunisation training, and dermatology courses. Doctors will be attending local GGPET training during May. Admin staff are provided with support and updates as necessary to include annual CPR/fire training.</p>
What were the results of the actions and what impact on patients and carers?	<p>By ensuring our clinical team are trained to the highest standard we can provide our patients with up to date and current care guidelines.</p>
How was this publicised.	<p>When our staff become trained in different clinical areas we are able in some cases to provide new services for example implant fitting by our Practice Nurse.</p>
Progress on previous years	

If you have participated in this scheme for more than one year, outline progress made on the issues raised in the previous year (s)

Year 1 We highlighted a priority as the recruitment of a replacement for Dr Foster. This has been very successful with Dr Kate Kindler now in place as our newest partner.

Year 2 Reception team recruitment continues to be a challenge but our team is now relatively stable and experienced. We would not discount another apprentice to work with us as and when a new vacancy arises as we found the process a real benefit to us and indeed our apprentice that worked with us for 12 months is now on a degree nursing course.

Year 3 Waiting room comfort – we have updated the waiting room with new blinds and tried to create a better environment with regularly rotated posters and our new TV screen which provides health messages. We have got quotes for replacing the flooring but with the possibility of a new extension are waiting to progress this.

PPG Sign Off	
Has the report been signed off by the PPG	Yes
What date was this report signed off:	February 2015

How has the practice engaged with the PPG

How has the practice made efforts to engage with seldom heard groups in the practice population? We regularly advertise and have written to

patients with specific needs asking if they would like to be involved but as yet we have not managed to encourage them to be a part. However we are happy to continue to try as everyone should have a voice.

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

Yes via our Patient questionnaire, online survey, friends and family & patient compliments/comments

How was the PPG involved the agreement of the priority areas and the resulting action plan?

We discussed this at our meeting and they were very helpful in brainstorming ideas. The PPG at Longlevens is a key link with our patients and ensuring that they are best looked after. They are concerned about the building in the local area as to how we are going to continue with our high level of service. Without funding for an extension this would be difficult as we are now struggling once again with space.

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

Happier patients, resulting in a happier practice and staff. Waiting area now cleaner and more inviting – radio has been stopped and CD royalty free introduced which we have had positive comments on.

Training staff to a high standard in mandatory courses and on new areas of expertise will allow us to provide patients with the help and support they deserve. CQC standards are our high priority to providing a safe environment for patients which is caring and supportive.

Patient access is good with many patients offered a routine appointment within 2 days.

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

The PPG at Longlevens are a lovely bunch of people who come together for the good of the practice. It is invaluable to have them work alongside us sharing ideas and sharing views. Fundraising has proved very successful with a new neonatal pulse oximeter being purchased alongside our state of the art ECG machine which integrated directly into the clinical system. It works extremely well.

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