NHS ENGLAND Standard Reporting Template

Birmingham, Solihull & Black Country Area Team

2014/15 Patient Participation Enhanced Service Reporting Template

Practice Name: Hampton Surgery

Practice Code: M89608

Signed on behalf of practice: Dr Ryan Prince Date: 24th February 2015

Signed on behalf of PPG Martin Shalley Date: 24th February 2015

1. Perquisite of Enhanced service. Develop/Maintain a Patient Participation Group

Does the practice have a PPG? YES

Method of Engagement: Face to Face

Number of PPG Members;

Detail the gender mix of practice Population & PPG

%	Male	Female
Practice	1449	1469
PPG	5	4

Detail of age mix of practice population & PPG

%	<16	17-24	25-34	35-44	45-54	55-64	65-74	75+
Practice	614	216	262	420	479	342	337	242
PPG				1	1		5	2

Detail the ethnic background of your practice population & PPG

White				Mixed/multiple ethnic groups				
	British	Irish	Gypsy or Irish traveler	Other White	White & black Caribbean	White & black African	White & Asian	Other Mixed
Practice	2685	28	4	79	3	2	12	16
PPG	9							

	Asian/Asian British				Black/African/Caribbean/Black British			Other		
	Indian	Pakistani	Bangladeshi	Chinese	Other Asian	African	Caribbean	Other Black	Arab	Any Other
Practice	49	13	3	3	17		3		1	
PPG										

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 practice regularly advertises on its newsletter and within the surgery for patients to join its PPG, but generally has not had a lot of response. One of our actions this year was to design a questionnaire based around the work the PPG has done since its inception and as part of this, patients were asked if they would be interested in joining the PPG. At the moment the PPG is working to talk to those that expressed an interest to see if they would wish to become a member

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:

2. Review of patient feedback

Outline the sources of feedback that were reviewed during the year:	
Patient survey, friends & family test	
How frequently were these reviewed with the PRG?	
At PPG meetings which tend to be quarterly	

3. Action Plan priority areas and implementation

Priority area 1

Description of priority area:

The PPG & practice wanted to look at the changes/ideas they had introduced since its inception and whether they had made a difference to the way the practice communicated with the patients. We also wished to gauge how many patients had seen the communications and if they had retained the information.

What actions were taken to address the priority?

The Practice, in conjunction with the PPG, devised a survey that was given to patients based on the work that the PPG & the practice have done over the last 2/3 years, asking questions amongst other things whether patients were aware of the following:

- That we had a PPG/what it is, and what it does?
- Who is on the PPG/would they consider becoming a member/If not why not?
- Were patients aware of newsletter/did they read it/Was it informative?
- Were patients aware of our website/did they use it/if not why not?
- Are they aware of the changes we have made so they can access online & book appoints & order repeat prescriptions?
- Were they aware of Electronic Prescribing System (EPS)?
- Were they aware of the extended hours surgery on a Tuesday/do they use it/or if not what would they prefer?

• General comments about the surgery

The survey was written by both the PPG & Practice Manager. Neither party had experience of putting together a survey, and the results may be subject to bias. For example - as the PPG newsletter is only delivered to the patients who actually live in Hampton-in-Arden village itself (via the parish council), the results do not take into consideration the views or comments of our patients who live outside this area e.g. patients in Barston and Bickenhill. However, the newsletter is uploaded to the website & also copies are put up in reception and left out for patients to read.

The results as stated were as follows:

- 17% of patients surveyed were aware that we have a PPG, & only 30% were aware of what it does/stands for
- 4% of patients were aware of on the membership of the PPG. Various reasons were given for not wanting to be on the PPG (time, don't know what's involved)
- A good list of names for possible new members has come out of the survey
- 38% of patients receive the newsletter & only 33% read it Over those receiving it, 94% found it useful
- 65% were aware we had website but only 6% use it regularly & 46% occasionally
- Only 37% of patients were aware that you can book appointments online, but 54% know you can order medication, & 54% know you can nominate a pharmacy to EPS
- 75% who use one or other of the above think it's a good service
- 49% were aware of evening opening, 20% have used it. 6.30pm on a weekday was more popular than opening on Saturday Morning
- A few comments came up one good suggestion was that we add the trainees to the website so patients can look up who they are & what stage of training they are at before they book an appointment, so this has already been actioned

Following the PPG meeting on 7th October the practice will implement the following:

- To address the public knowledge off PPG members, we will introduce a 'Spotlight on the PPG' into the newsletter highlighting each PPG member, starting with the chairman
- To list the PPG members in the newsletter with the note that if patients wish to speak to one of them directly they contact the practice manager who will ask one of the PPG to contact that patient
- To get the newsletter printed in A3 to put up in the surgery so it is more noticeable (this will be started after the next edition)
- To start a folder clearly marked and containing all previous newsletter for the reception area (practice practice to complete by end of

November)

Priority area 2

Description of priority area:

No one carer's experience is the same, and there are many different situations carers find themselves in. A carer is anyone who cares, unpaid, for a friend or family member who due to illness, disability, a mental health problem or an addiction cannot cope without their support. Carers often suffer ill-health due to their caring role. To care safely and maintain their own physical and mental health and well-being, carers need information, support, respect and recognition from the professionals with whom they are in contact. Improved support for the person being cared for can make the carer's role more manageable.

The PPG had concerns that the needs of patients (particularly the young) on the practice register who are carers may not being addressed or met, and this was highlighted by the fact that practice was aware that is has probably not been as proactive in the care and support that it offers carers as it could have been. We were keen to enlist the help and support of the PPG to address this situation.

What actions were taken to address the priority?

The practice has audited its patient population to ensure that all patients who have carers or are carers are correctly read coded.

The practice has arranged for the local carers centre (http://www.solihullcarers.org) to send a representative to talk about the service it offers to all the practice staff, & to encourage clinicians to signpost this service to patients who are, or have personal carers.

The practice has written to all the carers & patients with carers on their register, informing of them how they can either self refer in to the above service, or to discuss with one of the doctors at their next appointment who will then contact the service on their behalf.

A board within reception has been dedicated to carers and holds information about the services that the surgery can offer patients with carers or those that are carers themselves.

Alerts have been added to all records of patients who are carers or cared for ensuring that the clinicians seeing patients are aware of the carer status

The practice is to include regular information for carers in its PPG Newsletter

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

The practice can now has easy access to its list of patients with carers, and patients who are carers. Clinicians are aware from alerts on the patient screen that they have a carer or are a carer and can use this information to aid their consultation.

The practice has written to all carers & those who have carers informing them of the services the practice an offer along with information of local support services

A dedicated carer's board has been placed in the waiting room to advertise information of the services the practice & local support services offer.

The practice used the newsletter to remind carers of the help and support available from both the practice & other local support agencies

Priority area 3

Description of priority area:

The NHS offers services in primary care that are both proactive and reactive. The way of working with the frail elderly tends to be reactive. If a

patient doesn't attend or isn't seen regularly at the surgery then we may not know if their health or social circumstances are deteriorating. By developing a more proactive approach, we can promote health and independence. There are key issues that are specific to the frail elderly population that can lead to illness and reduce quality of life.

What actions were taken to address the priority?

The PPG at the surgery is quite closely linked with a local charity called the Fentham Trust, which supports residents within the Parish of Hampton-in-Arden. The practice approached the members of the PPG on the Fentham Trust to help support them in employing a support worker with the aim of promoting care closer to home, reducing admissions; facilitating early discharge and readmission by assessment and ongoing support, building lasting therapeutic relationships with patients and their families, promoting healthy and safe living for the frail elderly in Hampton, and encouraging engagement with activities to prevent isolation and declining mental health/cognitive function. The PPG were also particularly keen to be able to start health awareness sessions for patients.

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

The role was advertising in July 2014 and an appointment was made in early August 2014. Unfortunately the candidate withdrew just a few days before the appointment commenced. The post was re advertised and the post was finally filled in January 2015.

As the post took longer to fill than was first hoped, the decision was made to go ahead with our first health awareness session, during the summer. One of the GP registrars assisted in helping to organize a dementia awareness session. Supported by the Alzheimer's Society & a local Dementia Champion, patients & their relatives & carers were given the opportunity to come along and listen to other experiences of caring for people with dementia along with ideas of how to get help & support. The event was advertised in the surgery & locally and was extremely well attended. The feedback to the surgery has been extremely positive.

The support Worker commenced work on the 5th January 2015 and was introduced to the wider PPG at the meeting on the 25th February, and an article was placed within the Spring Newsletter to bring to the attend of the wider practice population.

The impact of the new role to the patients is as yet unknown, as we are at the start of a two year pilot, but the impact has already been felt by the patients on the support workers case load. Plans are also in place to promote healthcare through awareness sessions and hopefully a revamped influenza clinic which will allow patient's access to local support groups.

Progress on previous years

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

Hampton PPG has always wanted to work towards improving communication between the practice & its patients, and has continued to try and do this since its inception. The PPG/Practice continues to produce a newsletter to try and educate patients about their health & about changes that are happening at the surgery, such as the introduction of EPS, and the online booking of appointments & prescriptions. Both the practice and the PPG members continue to work together to answer questions and queries brought to the attention of PPG members by patients, either through the use of the newsletter or via the meetings held with the PPG.

The practice has now introduced the Friends & Family Test permanently, having been part of the pilot scheme in 2013/14. It had been decided that the practice would run this survey rather than the annual GPAQ, used in previous years. There were two reasons for this, firstly, that it is likely the

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practice will have to introduce this in 2014 as a permanent survey and this was an opportunity to see what it entailed. Secondly as the results from	
the practice survey each year tend to be very similar each year, this was an opportunity to see if anything different came to light. Overall we we	
pleased with the way the pilot but realized that we would need to run other surveys to gather more detailed patient feedback, which we will	be
doing in 2015/16.	

4. PPG Sign Off

Report signed off by PPG: YES Date of sign off: Report discussed and signed off by the PPG members on Tuesday 24th March 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? Has the practice received patient and carer feedback from a variety of sources? Own survey, F&F test 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? Do you have any other comments about the PPG or practice in relation to this area of work?