

# Annex D: Standard Reporting Template

South Yorkshire and Bassetlaw Area Team  
2014/15 Patient Participation Enhanced Service – Reporting Template

Practice Name: Ashville Medical Practice

Practice Code: C85003

Signed on behalf of practice: Melanie Jones      Date: 26th Feb 2015

Signed on behalf of PPG: AH      Date: 5<sup>th</sup> March 2015

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) Face to face meetings quarterly, and email and telephone contact as and when required.											
Number of members of PPG: 37 members											
Detail the gender mix of practice population and PPG: The total practice population is 10900 patients				Detail of age mix of practice population and PPG:							
%	Male	Female									
Practice	5359 (49%)	5541 (51%)	%	<16	17-24	25-34	35-44	45-54	55-64	65-74	> 75
PRG	13 (35%)	24 (65%)	Practice	2237 21%	1084 10%	1534 14%	1318 12%	1536 14%	1181 11%	1095 10%	915 8%

PRG	0 0%	1 3%	2 5%	3 8%	2 5%	7 19%	15 41%	7 19%	

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	9060	22	0	408	7	17	5	13
PRG	37	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	5	10	0	28	17	76	6	15		1211
PRG	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 practice has taken the following steps in agreement with the patient reference group, to ensure the group is representative of the practice population:

- The patient reference group is open to all registered patients at the practice.
- The patient reference group is advertised on the practice Jayex board in the waiting room.
- The patient reference group is advertised on the practice website, and a form to join the group can be downloaded by visiting [www.ashvillemedicalpractice.co.uk](http://www.ashvillemedicalpractice.co.uk) , patient information tab, and patient reference group.
- Posters have been placed in the practice waiting room and toilets, promoting the group and asking for volunteers.
- Slips are available on the reception desk for patients to complete if they wish to become a member of the group.

- Increasing numbers of the patient reference group was discussed at a patient reference group meeting on 17<sup>th</sup> April 2014 and this was agreed by the group as a priority area, to try and increase numbers of the group, and to hopefully have a group more representative of the practice population in terms of numbers and patient demographics.
- Some patient group members have strong links with the Ardsley Residents Association who have displayed a poster to join the patient reference group at their meetings.
- Attached staff at the practice have been asked to promote the patient reference group e.g. Health Visitors, Midwives.
- Advertisements have been placed in the Barnsley Chronicle.
- Registration forms for new patients to join the patient reference group are included in all new patient registration packs

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:

- Complaints, Compliments, and Suggestions received at the practice.
- Results of the Patient Survey conducted.
- Friends and Family Test results.
- Feedback from the patient reference group members at each meeting.
- Feedback from the patient cards, the patient group and the CQC at the CQC inspection in December 2014.

How frequently were these reviewed with the PRG?

Complaints, Compliments and Suggestions were reviewed with the patient reference group at the following meetings:

Reviewed on 17<sup>th</sup> July 2014 at the patient reference group meeting

Reviewed 23<sup>rd</sup> October 2014 at the patient reference group meeting

Reviewed 22<sup>nd</sup> January 2015 at the patient reference group meeting

They are also reviewed as received by the Practice and if any actions are required they are taken accordingly and in agreement with the patient reference group if required.

The patient survey was reviewed at the patient reference group meeting on 22<sup>nd</sup> January 2015

The results from the Friends and Family test from 1<sup>st</sup> December 2014 were reviewed at the patient reference group meeting on 22<sup>nd</sup> January 2015, and any comments are reviewed by the practice upon receipt

The CQC inspection was on 16<sup>th</sup> December 2014 when the patient feedback cards, and patient group and CQC feedback were reviewed. 10 members of the patient reference group attended and gave their feedback to the CQC

### 3. Action plan priority areas and implementation

#### Priority area 1

##### Description of priority area:

To change the appointments system to improve accessibility to the practice and increase on the day and pre bookable appointments. The appointments system was altered in 2012 however after continuous monitoring the practice and patient reference group felt the need to alter it again as cracks had begun to show, and it was becoming more difficult for patients to obtain an appointment, and the practice felt they had to change the way they worked to improve the situation. This priority area and the new appointment system were agreed at the patient reference group meeting on 17<sup>th</sup> April 2014.

##### What actions were taken to address the priority?

On the 28<sup>th</sup> April 2014 the appointments system was changed so that there were increased pre-bookable appointments, and increased on the day appointments, thus trying to improve timescales in which patients are seen and improve accessibility at the

practice and increase same day appointments.

Due to the increase in pre bookable appointments the practice was also able to make pre bookable appointments available within shorter timescales of 7 days and 14 days. E.g. 1day, 2days, 3days

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

- The change of appointments system was agreed with the patient reference group at a meeting on 17<sup>th</sup> April 2014, it was implemented on 28<sup>th</sup> April 2014.
- The patient reference group were provided with posters of the change to take to the groups they attended and also to display in public areas.
- Posters were displayed in the surgery, and when patients attended the surgery they were also given a leaflet.
- The new appointment system was explained to patients at the time of booking and that they would be seen within a 30 minute time window, by any doctor at same day appointments.
- The appointment system has been well received by patients and there has been positive feedback that patients like the new appointment system and the ability to be seen quickly.
- Patients who present at the surgery with medical conditions in which they don't think are serious, are able to be seen quicker if clinically appropriate, as receptionists ask the patients the nature of their condition, and this is monitored by the GP's who see patients in order of time arrived however will see in order of clinical need if appropriate.
- Positive feedback has been received on the new appointments system.
- The patient survey this year has demonstrated an increase in the percentage of patients stating they were able to be seen on the same day from 59% to 63%, and also an increase in how easy patients found it to make an appointment with a doctor from 65% to 72% compared to the survey in 2013-2014. Attached is a document displaying the comparisons of the current and previous 2 years surveys.



Patient Satisfaction  
Survey Comparisons

Attached are posters and leaflets that were displayed, distributed, and given to patients



Appointments

Patient Leaflet- April



Appointments

Patient Poster- April

## Priority area 2

### Description of priority area:

Patient Reference Group- Increase the number of members to enable a more diverse representation of the practice population. This priority area and actions to be taken were agreed at the patient reference group meeting on 17<sup>th</sup> April 2014.

### What actions were taken to address the priority?

In agreement with the patient reference group the following actions were taken:

We advertised the group on the Jayex board in the surgery.

Gave joining forms to the midwives, and health visitors.

Placed posters throughout the surgery and toilet facilities advertising the group and requesting new members to join

The patient reference group took advertisements to the groups they attend.

The patient reference group designed an advertisement that was placed in the Barnsley Chronicle on 26<sup>th</sup> September 2014 and was in the chronicle for 4 consecutive weeks.

The patient reference group gave out joining forms at 2 flu clinics held at the surgery.

We included joining forms in the new patient registration pack, so all new patients registering at the practice have the option to join the group.

Advertisements to join the group were placed on the B side of prescriptions.

Patients may also join the group as virtual members if they are unable to attend quarterly meetings

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

The group started with 20 members in the patient reference group and after all the actions have been taken to address the priority the patient reference group has almost doubled in size by increasing to 37 members.

Attached are posters and forms given to patients at registration as well as being made available at the reception desk and on the practice website [www.ashvillemedicalpractice.co.uk](http://www.ashvillemedicalpractice.co.uk)



Ashville Patient  
Reference Group Pos



Patient Group joining  
form

Attached are the advertisements that were placed in the Barnsley Chronicle by the patient reference group members.



Advertisement 1  
Barnsley Chronicle- Si



Advertisement 2  
Barnsley Chronicle - C

### Priority area 3

#### Description of priority area:

Obtain feedback/communication- Encourage feedback in the form of suggestions, compliments and comments.  
This priority area was agreed at the patient reference group meeting on 17<sup>th</sup> April 2014.

#### What actions were taken to address the priority?

In agreement with the patient reference group the following actions were taken:

- New patient feedback boxes were placed in the surgery.
- The patient reference group encouraged patients of the practice they knew to provide feedback.
- Posters were placed in the surgery encouraging patients to give us feedback.
- We also advertised the opportunity to provide feedback on the Jayex Board in surgery.
- We conducted a patient satisfaction survey to obtain feedback.
- Implemented the Friends and Family test encouraging patients to provide feedback on the reasons why they gave the answer they did.

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

The attached poster was placed around the surgery, and also the attached feedback forms



Patient Feedback  
Poster



Compliments  
Comments and Suggest

Attached are the results of the patient satisfaction survey





Ashville Medical  
Practice Patient Survey

- The practice had a care quality commission (CQC) inspection and the CQC praised the practice for welcoming patient feedback and displaying it well.
- The practice has demonstrated that patient feedback is very important, and is encouraging patients to provide it to improve the open relationship between patients, the patient reference group and practice staff.
- The practice has demonstrated that it is listening, and being responsive to patients by taking a “You said we did approach” and sharing the information on the practice website, with the patient reference group and also in the surgery.
- The practice has compiled a comparison report on patient surveys and has improved and maintained a standard when patients want to see any doctor. The results for seeing a Dr of choice have reduced this year however the patient reference group agreed this was to be expected as a Dr went on maternity leave, a Dr left the practice and sit and wait clinics with any Dr were introduced.
- The process of booking an appointment with a Doctor has improved from previous surveys and 72% patients found the process easy.
- The practice has much clearer pathways for patients to give feedback.

### 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):

The practice has prepared action plans year on year from issues raised and has reported on and updated the actions at the patient reference group meetings throughout the years.  
The attached document shows all the action plans on issues raised in the current and previous years, and the progress made. All actions have been discussed and agreed with the patient reference group.  
The practice has taken a “You said, we did “approach.



Progress on current  
and previous years

#### 4. PPG Sign Off

Report signed off by PPG:

Date of sign off: A draft report was discussed at the patient reference group meeting on 22<sup>nd</sup> January 2015, and the group agreed that group member AH would sign the final report off on behalf of the entire group.

The final report was emailed to AH on 5<sup>th</sup> March 2015 and AH signed the report off by email on the same date.

How has the practice engaged with the PPG:

The practice has had face to face quarterly meetings with the PPG, and has also had telephone and email contact when required.

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

The patient reference group is open to all registered patients. There have been advertisements in the local newspaper for 4 consecutive weeks; the patient reference group is advertised in the surgery, and registration forms are included in all new patient registration packs.

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

Feedback has been received by the patient reference group at face to face meetings, by email from members of the patient reference group; feedback has also been received verbally in the practice, and by using the patient feedback boxes in the surgery.

Was the PPG involved in the agreement of priority areas and the resulting action plan? – Yes the priority areas and action plan were agreed at the patient reference group meeting on 17<sup>th</sup> April 2014.

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

There is a larger patient reference group.

Feedback has been received from patients that the appointments system has improved.

The practice has demonstrated listening to feedback and improvements have been made i.e. flu clinics ran smoother.

The practice has demonstrated listening to suggestions and made changes where feasible i.e. altered the position of the spotlights in the waiting room, displayed posters with regards to the use of mobile phones.

Issues raised have reduced year on year and the practice has demonstrated they have taken issues seriously and dealt with them providing regular updates to the patient reference group.

The practice received excellent feedback at the Care Quality Commission (CQC) inspection on 16<sup>th</sup> December 2014, and from walking into the building they stated they had a positive experience and there was a community feel about the place. Other areas of positive feedback from the CQC were:

1. There is a good process for complaints and they are handled in a timely and professional manner
2. There are strict codes of prescribing and robust monitoring processes
3. Choose and book was used how it should be
4. There is easy access for people requiring emotional support
5. There is access to a Health Trainer on site
6. Caring is outstanding and they commended the practice following the Palliative Care gold standards framework
7. Outstanding at looking after vulnerable patients
8. Flagship practice for substance misuse
9. The practice provides enhanced services
10. Professional customer service
11. There is clear leadership and it was extremely evident the relationship with the practice manager and patient reference group was very strong.

The Care quality Commission (CQC) had no concerns about the practice and commended the high level of patient involvement.

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

It is great to receive positive feedback from Chris Ruddlesdin, Chair of the Barnsley Patient Council, and Lay Member for Patient and Public Involvement at the Barnsley Clinical Commissioning Group (CCG). He promotes Ashville Medical Practice patient reference group to other practices and the CCG as being a very successful group.

The patient reference group have commended the Practice Manager and stated there has been a significant improvement since she joined the practice and they also conveyed this information to the CQC when they did an inspection on 16<sup>th</sup> December 2014.

The practice has a very supportive and committed patient reference group and is very appreciative of the group, and their dedication.

Patient reference group members have a greater understanding and awareness of the needs and realities faced by the practice, and are more committed to supporting change in order to promote efficiency and progress. Members can enhance good communication and links with other patients, agencies and organisations in a positive and effective way, and take forward issues of concern to the practice in a constructive manner.