Annex C: Standard Reporting Template

**Essex Area Team**

**2014/15 Patient Participation Enhanced Service – Reporting Template**

Practice Name: Angel Lane Surgery

Practice Code: F81090

Practice website address: www.angellanesurgery.co.uk

Signed on behalf of practice: Dr Peter Linn Date: 19/3/15

Signed on behalf of PPG: June Milne Date: 19/3/15

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

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| Does the Practice have a PPG? YES  |
| Method of engagement with PPG: Face to face, Email, Other (please specify) Face to face and Email |
| Number of members of PPG: 8 |
| Detail the gender mix of practice population and PPG:

|  |  |  |
| --- | --- | --- |
| % | Male  | Female  |
| Practice | 49% | 51% |
| PRG | 25% | 75% |

 | Detail of age mix of practice population and PPG:

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| % | <16 | 17-24 | 25-34 | 35-44 | 45-54 | 55-64 | 65-74 | > 75 |
| Practice | 19% | 8% | 11% | 13% | 15% | 13% | 12% | 9% |
| PRG | 0% | 0% | 0% | 0% | 12.5% | 12.5% | 50% | 25% |

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| 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  | 95.15 | 0.56 | 0 | 2.69 | 0.09 | 0.09 | 0.16 | 0.06 |
| PRG | 100 | 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 | 0.34 | 0.04 | 0.06 | 0.26 | 0.18 | 0.06 | 0.01 | 0.16 | 0 | 45.82 |
| PRG | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |

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| 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:**We feel the practice is well represented by our group. We currently have good representation from the over 45 age groups and a good male/female mix. We are however currently trying to recruit new members, having had 1 member leave very recently. We would ideally like to recruit younger male members perhaps from a different ethnic background, but as we generally meet during the day (to enable both the Practice Manager and GP Principal to attend) this has in the past proved difficult. We discussed at our last meeting the possibility of having some virtual members and although this would be more difficult to coordinate between the 2 groups it may be something we look at later in the year.** |
| 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? NOIf you have answered yes, please outline measures taken to include those specific groups and whether those measures were successful: |

1. Review of patient feedback

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| Outline the sources of feedback that were reviewed during the year:Suggestion boxComments directly to PPG membersComments directly to receptionComments directly to clinical staffComplaints/queries to Practice Manager |
| How frequently were these reviewed with the PRG? The PRG meet every 2 months and any feedback is discussed at every meeting. |

1. Action plan priority areas and implementation

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| Priority area 1 |
| Description of priority area:Telephone Access. Patients and other healthcare workers were having difficulty accessing the surgery via telephone in the mornings. |
| What actions were taken to address the priority?We recruited 2 new receptionists to enable us to have one staff member dedicated to answering the phone all morning. We have also adjusted our appointments so that patients can get appointments more easily reducing the need for them to call back on that day for an “on the day” appointment. We have also given out details of a bypass number that other healthcare professionals can use if they need to get through to the surgery urgently.  |
| Result of actions and impact on patients and carers (including how publicised):Patients, carers and other healthcare workers can now get through to the surgery on the telephone much more easily. Other healthcare workers are able to speak to a doctor more quickly if they need to, for example to reduce admissions to hospital.We have had positive feedback from patients regarding this and the fact that they can get appointments more easily now. |

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| Priority area 2 |
| Description of priority area:Fitting of automatic doors to the front entrance of Angel Lane Surgery |
| What actions were taken to address the priority?With help from our PRG we did lots of fundraising and managed to raise funds to fit automatic doors to the front entrance.  |
| Result of actions and impact on patients and carers (including how publicised):This has been an overwhelming success with patients constantly giving extremely positive feedback through PRG members and comments to the receptionists. It has made it much easier for patients with buggies, wheelchairs, frames etc to be able to access the surgery.The only problem we have encountered is that patients leave their mobility scooters outside close to the doors which prevents the doors closing. We have had plans drawn up and approved to build a mobility scooter shelter close to the entrance so that they will stay dry and away from the doors. We hope to have this completed in the next year.  |

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| --- |
| Priority area 3 |
| Description of priority area:Residential developments in Great Dunmow and future siting and provision of the GP Services. With the implementation of the Neighbourhood Plan in and around Great Dunmow, the population is set to grow significantly. Various options of the provision of GP services are being suggested and currently in consultation with the CCG. Our PRG are very concerned regarding this and are keen to be very active in ensuring there is adequate provision of GP services and that it remains within the town of Great Dunmow and not moved to an out of town site, making access difficult for many patients.  |
| What actions were taken to address the priority?The PRG are in the first instance planning on conducting a patient consultation to obtain the views of the patients of Angel Lane Surgery. The Practice Manager and GP Principal are in consultation with the CCG and John Tasker House (the other GP surgery in Great Dunmow), to try and work out the best option for all. |
| Result of actions and impact on patients and carers (including how publicised):This will be advertised in the local press, in our quarterly newsletter and online. If our services are moved out of town this will have a huge impact on our patients so we feel very strongly that this is a high priority area over the next year or so.  |

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 introduced a minor ailment protocol last year to try and reduce appointments with the GP’s. This has been very successful as it is now very much easier to get an appointment with a GP as patients with minor ailments are now able to see the nurses. We now also have 2 doctors who are GP Trainers allowing us to have 2 GP Trainees, this has also given us a great deal more GP appointments.

We now have 4 receptionists available to answer the telephone in the morning with one dedicated to answering the phone only.

We have done a display in the waiting room to advertise our website and encourage patients to order their prescriptions online and book appointments. They can now also access areas of their medical record. The dispensary staff have noticed a difference in an increase in patients ordering their medications this way and the number of appointments booked online has also been increasing.

1. PPG Sign Off

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| Report signed off by PPG: YES/NODate of sign off:  |
| How has the practice engaged with the PPG:How has the practice made efforts to engage with seldom heard groups in the practice population? – Newsletter and minutes, online and in practice. Actively sought participation but difficult to attend meetings, notice boards, suggestion box, local press.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?We produce a newsletter every quarter which is distributed to public buildings around the town as well as being in our waiting room and on our website. The minutes of every PRG meeting are published on our website. We advertise in the local press when necessary (eg flu clinics).There is a dedicated notice board in the waiting room for the PRG to display notices etc. We also have a large notice board area for other patient information posters etc.We have a suggestion box in the waiting room that is emptied and actioned on weekly.The PRG were very much involved with all the priority areas and future plans of the surgery. We keep them informed, up to date and are an essential part of the team at Angel Lane Surgery.Patients can now get through to the surgery more easily on the telephone, they can access the surgery better with the automatic doors and can get appointments more easily and with a greater choice of GP.  |