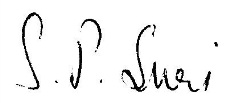
Annex D: Standard Reporting Template

Walsall Area Team

2014/15 Patient Participation Enhanced Service – Reporting Template

Practice Name: **Birchills Health Centre**

Practice Code: **M91629**

Signed on behalf of practice: Mrs Pali Suri  Date: 20/03/15



Signed on behalf of PPG: Mr Richard Dean Date: 20/03/15

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)   1. *Face to face during the PPG Meetings and on ad-hoc basis when members call into the surgery. Also face to face with the chair who calls in to prepare and discuss the agenda.* 2. *Via e-mail with the chair who keeps us up to date with the meetings, conferences and workshops that he has attended on behalf of the group.* 3. *Phone – we telephone the PPG Members to invite them to the next meeting* | |
| Number of members of PPG: **15** | |
| Detail the gender mix of practice population and PPG:   |  |  |  | | --- | --- | --- | | % | Male | Female | | Practice | 2193 (49 %) | 2245 (51 %) | | PRG | 8 (53.3 %) | 7 (46.7%) | | Detail of age mix of practice population and PPG:   |  |  |  |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | --- | --- | --- | | % | <16 | 17-24 | 25-34 | 35-44 | 45-54 | 55-64 | 65-74 | > 75 | | Practice | 1282  29% | 497  11% | 734  17% | 645  15% | 532  12% | 373  8% | 223  5% | 152  3% | | PRG | 0 | 0 | 1  7% | 0 | 2  14% | 4  28% | 8  56% | 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 | 2161  48.7% | 5  0.11% | 2  0.05% | 213  5% | 22  0.5% | 14  0.3% | 20  0.4% | 13  0.3% | | PRG | 12  80% | 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 | 306  7% | 966  22% | 1  0.02% | 26  0.06% | 58  1.3% | 173  4% | 44  0.9% | 26  0.06% | 0 | 388  8.7% | | PRG | 2  13% | 0 | 0 | 0 | 1  6% | 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:  *Our PPG Group is widely publicised. We display posters in the reception area to invite new members to the group.*  *We also advertise the PPG on our practice website and in our practice leaflet. Our members are advertising the group by the “word of mouth”.*  *We are trying to ensure that all the patients regardless of their gender, orientation, age, race and disability are involved in the PPG.*  *The Surgery is covering a diverse population, the members are engaged from diverse life backgrounds.* | |
| 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**  If you have answered yes, please outline measures taken to include those specific groups and whether those measures were successful:  *We have a significant number of jobseekers and we endeavour to try to recruit some of those patients into the group.* | |

1. Review of patient feedback

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| Outline the sources of feedback that were reviewed during the year:  *We carried out GP/Patient Survey during November and December 2014. One hundred surveys were completed by our patients at to give us their views using the GP/Patient questionnaire. We collate the answers and report back to the PPG.*  *Attached are the latest results and the report:*    *Also from December 2014 we are asking our patients to take The NHS Friends and Family Test. This is an on-going work, the first few months proved that majority of our patients would Extremely Likely or Likely recommend the Birchills Health Centre to their friends and family.* |
| How frequently were these reviewed with the PRG?  *The GP/Patient Survey results were discussed with the group in December 2014. This was followed by another discussion about the achievements by implementing some of the changes suggested by the patients and the PPG in March 2015.* |

1. Action plan priority areas and implementation

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| Priority area 1 |
| Description of priority area: **Surgery** **Opening Hours Awareness** |
| What actions were taken to address the priority?  *Following the result of our GP patient survey, we are aware that some patients are not quite sure what our opening times are. We have discussed this in our PRG meetings on several occasions over the past 3 years and we continue to publicise the times as follows:*   * *display on the front door* * *published on the website* * *printed in the practice leaflet* * *given to patients if requested verbally over the telephone and counter* * *patients are first informed by the reception staff when submitting their registration and then reminded when booking appointments*   *All the above are kept up to date and we publicise our closing/opening on bank holidays.* |
| Result of actions and impact on patients and carers (including how publicised):  *In the first two years of our GPAQ, we had seen an improvement in the number of patients who were aware of our opening times. However, in the last year’s survey, this has dropped. We are uncertain as to why this is occurring and we have since started to target new registering patients so they are aware of where we advertise our opening hours.* |

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| Priority area 2 |
| Description of priority area: **Reducing A&E Attendances** |
| What actions were taken to address the priority?   * *Patients are educated by GPs, Nurses and reception staff on when it is appropriate to attend A&E* * *Changing the ideas of patients from abroad, of what services to use and when. Many EU patients are used to going to A&E.* * *We did open on Wednesday afternoons and Sundays, in order to reduce the number of A&E attendances* * *GPs contact patients who attend A&E for minor ailments and educate them on when to use the service* * *On-the-day appointments are available at the surgery* * *The ‘frequent fliers’ have been informed that they can walk in at any time during our opening hours to be seen by a GP or to telephone for advice.* * *We have started GP telephone triage service on our busy days – Mondays and Thursdays* |
| Result of actions and impact on patients and carers (including how publicised):  *The A&E attendances audit shows a reduction in the number of A&E attendances during the same 3 month period (November – January) of 2013/14 and 2014/15.*    *It was suggested that the results of this audit are published on the practice website.*  *Please see also attached profile of our A&E attendances presented at our Locality Meeting on the 12th March 2015. From this CCG Audit our annual predicted A&E attendance was 912, however if we continue our trend, our number of attendances will be approximately 60 less than predicted.* |

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| Priority area 3 |
| Description of priority area: **DNA’s and Missed Appointments** **& Future Appointments Management** |
| What actions were taken to address the priority?   * *The surgery is now sending text messages to patients to remind them of their appointments and giving them the option to cancel via return of text, it if they are unable to attend.* * *We also introduced ‘telephone triage’ clinics. The GPs telephone patients to discuss their need for an urgent appointment on the day. The GP gives advice over the phone or invites the patient to be seen on the day.* * *Patient education* * *The DNA’s are followed by a text message* |
| Result of actions and impact on patients and carers (including how publicised):  *Our number of missed appointments has reduced and we can utilise the cancelled slots for urgent appointments on the day. Also, the telephone triage clinics have impacted on appointment availability and impacted on the patients of what is urgent. Our patients are happy to discuss their problem over the phone as they get quick advice on the day and in many cases they don’t need to attend.* |

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):

1. *Opening Hours – informing our patients of the opening hours is an on-going process. We seem to have improved in the first two years but dropped down last year. We will continue to advertise the opening times and keep our patients informed of any changes.*
2. *A&E attendances – our A&E attendances have improved year on year and we endeavour to continue this improvement by educating our patients and making the access to our services easier for them.*
3. *DNA’s – We are in the process of updating our patient’s mobile phone number database so we can enrol as many patients to our text message reminder service. We hope that by doing this, there will be more progress to show in the years to come.*

*Below are the results of the GPAQ 2012/13 and 2013/14 for comparison*

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1. PPG Sign Off

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| Report signed off by PPG: YES  Date of sign off: **20th 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?  *It was suggested that the PPG should be promoted in different languages to try to involve a wider community. The TV in reception can be used to promote the group to different cohorts of patients during various clinics i.e. Baby Clinic, memory clinic, care reviews etc.*  Has the practice received patient and carer feedback from a variety of sources?  *Yes via GPAQ*  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?  *The all-round care has improved but it is too early to know how much it has improved.*  Do you have any other comments about the PPG or practice in relation to this area of work?  *We meet on a regular basis and our new Chair is very pro-active in attending various meetings and workshops organised by Walsall CCG and NHS England. He gives feedback to the group and the surgery. He is looking at the ways of increasing participation in the group.* |