PPG Reporting Template

London Region [North Central & East/North West/South London] Area Team 2016/2017 Patient Participation Enhanced Service - Reporting Template

Practice Name: BRUNSWICK MEDICAL CENTRE

Practice Code: F83048

Signed on behalf of practice:

Date: 27/3/17
Date: 27/3/17

Signed on behalf of PPG: K. Heunebegg

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,

Number of members of PPG: 8

Detail the gender mix of practice population and PPG:

%	Male	Female
Practice	3108	3462
PRG	2	6

Detail of age mix of practice population and PPG:

%	<16	17-24	25-34	35-44	45-54	55-64	65-74	> 75
Practice	750	1310	1942	969	639	460	306	194
PRG	1		1			1	7	

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	334	157	0	1750	19	43	0	234
PRG	7			1				

		Α	sian/Asian British			Black/Afri	can/Caribbean/E	Black British	0	ther
	Indian	Pakistani	Bangladeshi	Chinese	Other Asian	African	Caribbean	Other Black	Arab	Any other
Practice	189	89	514	542	423	43	19	152	109	1926
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:

Text messages to patients that do not attend the practice often, Leaflets attached to prescriptions/details of next meeting on right side of prescription. Posters in surgery, sign up sheet in reception, advertised on Patient information screen (Envisage), verbally invite patients. Details and sign up included in New Registration packs. Vary the times PPG is held i.e evenings/afternoons etc.

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 high number of students and young patients who do not attend the surgery frequently, to target these patients we send out text messages, emails and advertise on our website, also details of sign up and PPG are included in new registration packs. We have a high number of Bengali speaking patients and these are invited verbally when they attend the surgery or letters are sent to invite to meetings, interpreters are booked if enough patients state they can attend,

2. Review of patient feedback

Outline the sources of feedback that were reviewed during the year: PPG meetings, patient complaints verbal and written, KPI/Internal survey. Friends and family comments/suggestions

How frequently were these reviewed with the PRG? Discussed with PPG members 28.7.16 & 27.3.17. All feedback reviewed quarterly internally with staff.

3. Action plan priority areas and implementation

Priority area 1

Description of priority area: Preferred GP – many patient only want to see one particular GP, however this means that patients have to wait longer to see their preferred GP

What actions were taken to address the priority?

Priority Area	Actions	Who does this?	Deadline
Preferred GP	Review current appt system regularly. Currently recruiting permanent GPs. Only use regular locums or offer short-term contracts until vacancies filled.	Surgery	ongoing
		-	

Result of actions and impact on patients and carers This is still a priority area carried over from last year. Actively recruiting for GPs to cover 13 sessions, 2 vacant sessions covered by long-term locum remaining 9 sessions covered by regular locums from internal bank so that patients are able to see the same GP wherever possible and continuity is maintained as much as possible

Priority area 2

Description of priority area: Appointment waiting times – 3-4 week wait for appointments

What actions were taken to address the priority?

Priority Area	Actions	Who does this?	Deadline	
Insufficient appointments to meet demand either routine or same day. Sessions can only be added on once locum is confirmed.	Promote Online consultation service, advertised on website/in-house and included in new registration packs. Ensure staff book appointments appropriately, i.e NP instead of GP where possible, Promote Camden Hub evening and Saturday Clinics	Surgery	On-going	

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

Still ongoing problem, continually monitored. Currently meeting contractual requirements in regards to appointments per patients, however demand has increased, also list size has increased, extra sessions have been added. This will need to be reviewed on a monthly basis in order to try to meet demand. Saturday and evening appointments are used via the Camden Federation, this will improve access especially for working patients who are unable to attend during the week. Camden Hub service is advertised within the surgery and on our patient information screen. Online consultation service advertised within surgery and on patient information screen, as well as on our website.

Priority area 3

Description of priority area: Clinics running late

What actions were taken to address the priority?

Priority Area	Actions	Who does this?	Deadline
Waiting to be seen – patients kept waiting more than 30minutes after their appointment time	Staff reminded to keep patients updated if doctor running late. Doctors also reminded to alert the staff if they are dealing with a complex issue/emergency so that waiting patients can be informed of delay. Staff to ask patients to give brief summary of their condition so that appropriate booking and time can be allocated, i.e double appointment with nurse/GP for more complex issues. Specialist clinics set up for patients with long term conditions.	Surgery	On-going

Result of actions and impact on patients and carers (including how publicised): Staff make patients aware if clinic is running late, message is also put on envisage screen alerting patients of any delays. We ask patients to give brief summary of their condition so that adequate time is allowed for appointment if needed. Alerts on patient notes to if patient has multiple issues and will always need double appointment as recommended by clinician. Specialist clinics with longer appointment slots to focus on patients with long term conditions, this allows the patient to discuss their issues/concerns without feeling rushed. There are notices in the waiting area advising patients that if they have a complex issue to book a double appointment.

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):

Priority Area	What action has been taken?	Who is responsible for this?	What action still needs to be taken?	Deadline
Telephone access	New telephone system installed, with more functions	Surgery	None	N/A
Appointment waiting times	Continue to monitor, ongoing issue, recruiting for permanent GPs. Appropriate appt booking	Surgery	Continuous monitoring	On-going process
DNA rates	Letters have been sent to persistent offenders, text reminders,	Surgery	Still an issue for LTC clinics and New Patient Health check appts, mainly for students – see priority area	Continue to monitor

4. PPG Sign Off

Report signed off by PPG: YES/NO

Date of sign off: 27 |3 | 2017

How has the practice engaged with the PPG: Face to Face meetings, members can also provide feedback over the phone or via email to the manager.

How has the practice made efforts to engage with seldom heard groups in the practice population? Letters to members, advertised on website and within surgery, word of mouth

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

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? It is an ongoing process, adjustments are made daily according to demand, Long Term Condition Clinics are a benefit to patients as they are more involved in their care and receive adequate support from the GP.

Do you have any other comments about the PPG or practice in relation to this area of work? Yes. We need to increase the number of attendees. Current members have spoken to other patients inviting them to meetings.