

SERVICE SPECIFICATION 2013-14 REGARDING THE PATIENT PARTICIPATION GROUP

Step 1 : Developing a structure which gains the views of patients and enables the practice to obtain feedback from the practice population e.g. a Patient Reference Group (PRG) or Patient Participation Group (PPG).

**Summary of steps taken by the practice to maintain a PPG.
2013 / 2014 Update**

1) The PPG has continued to develop. The Group was initially convened from interested patients on Thursday 15th December 2011 and had continued with regular meetings taking place every other month the most recent one being on Thursday 20th March 2014. As mentioned in the previous two reports, the initial plan was to have quarterly meetings; however the group has continued with bi-monthly meetings, which have proved to be more productive.

2) Steps have been taken to ensure there is true representation of registered patients within the group. We have continued to endeavour to attract younger patients to the group. The local careers evening for secondary school pupils attended by Dr Penny and Charles McEvoy in March 2012 and again by Dr Charles McEvoy in Feb 2014 was felt to have been very successful. In order to raise the profile within the 17-24 age cohort, Dr Penny and Charles McEvoy invite such patients to join the group when they see them during consultations (on occasions when it is clinically appropriate to do so) and will strive to continue to do this.

3) Strategies to facilitate patients to join the PPG from March 2013

New methods used :

Drs Charles and Penny McEvoy inviting patients of other age cohorts (ie as well as the 17-24 cohort) to the group through consultation

Dr Mateusz Mielcarek is trying to encourage some of the Polish/Eastern European patients to be part of the group by inviting them directly when appropriate during face-to-face consultations.

The website has been updated and the PPG practice icon :-



has been placed on the front page with an explicit invitation to patients to “join the patient participation group”

Continuing methods :

Displaying posters in the patient waiting room (containing a form to return if the patient was interested in joining the group)

Specific notice board for the PPG

On-line via the website

4) Continuing development of the PPG

The PPG members would like anybody who is interested to attend and therefore any interested patients are warmly invited to attend meetings.

5) Meetings

The PPG usually meets bi-monthly.

In 2013-14 the meeting dates have been :

Thursday 31st Jan 2013 Monday 25th March 2013 Tuesday 21st May 2013

Thursday 25th July 2013 Thursday 17th Oct 2013 Tuesday 10th Dec 2013

and Thursday 20th March 2014

Usually a practice staff member attends in a supportive / facilitatory capacity.
 During 2013 and 2014 the staff members attending have been :
 Dr Penny McEvoy, Dr Charles McEvoy & Dr Matt Mielcarek : GP Partners
 Miss Samantha Miles : Practice Manager & Partner

Description and Profile of PPG Members

Active members - attend meetings in person

Name	Age band	Ethnicity	M/F	Profile
Rebecca Newman	17 – 24	White British	F	Student/secondary school
Mr Edward McGowan	65 – 74	White British	M	Member of Yorkshire Cancer Network & Haematology Group
Mrs Judith Webb	65 - 74	White British	F	Retired Teacher
Catherine Green	65 – 74	White British	F	NHS background, currently locality Manager in Ripon for Age UK (formerly Age Concern)
Greta Milsom	75 – 84	White British	F	Past nursing experience & Carers Resource in Ripon
Anthony Milsom	75 - 84	White British	M	Retired
Michael O'Reilly	65 – 74	White British	M	Retired
Jane Fowler	45 – 54	White British	F	Data Analyst
Trevor Ingham	75 – 84	White British	F	Retired
Christina Pickup	55 – 64	White British	F	Primary Care Trust
Brenda Tabor	Over 84	White British	F	Volunteer telephone service for people living alone.
Peter Warters	65 – 74	White British	M	-
Fiona Wood	25 – 34	White British	F	-

Withdrawn from the Group

Barbara Dean	Over 84	White British	F	Retired
Jan Filippi	55 – 64	White British	F	Child crèche, Ripon Leisure Centre & history of care involvement work

Virtual group - liaise with group by e-mail / post

Name	Age band	Ethnicity	M/F
Jan Filippi	55 – 64	White British	F
Barbara Dean	Over 84	White British	F
Margaret Baxter	75 – 84	White British	F
Peter Liddle	75 – 84	White British	M
Ruth Askham	75 – 84	White British	F
Margery Lowe	75 – 84	White British	F
Cyril Dix	Over 84	White British	M

We are still actively encouraging to increase involvement and representation in the 25-34 and 35-44 cohort. We previously had some patients in this cohort in the virtual PPG but unfortunately they have disengaged.

We still strive to continue to encourage this cohort to join.

We have recently completed our annual survey which included a question asking patients if they would like to be a member of the Patient Participation Group, as a result of which we have received several emails so we are hopeful that we may soon have some representatives from these cohorts in the virtual PPG at least and potentially even attending meetings.

Step 2: Agree areas of priority with the PRG

The PRG had two priority areas for 2013-14 ie the Annual Patient Survey and the Practice Newsletter.

(a) Annual Patient Survey

Ideas for the annual patient survey were discussed at the PPG meeting on Thursday 17th October 2013.

It was hoped that the surveys could be completed over the period of the flu immunisation campaign, as this would provide the opportunity to attract some older patients who would not ordinarily come in to the Practice as well as the usual mix of attenders.

We hoped to target 700 patients, the same number as last year.

After both general discussion and discussion of last year's survey results and with a desire to maintain some continuity or survey content it was decided that the main topics for the survey would include :

- how prescription requests are ordered**
- if patients were aware of the online prescription request/ordering system**
- whether it would be helpful for members of staff to wear name badges**
- a question about the Patient Participation Group to attract new members**
- the quality of the overall service provided the Practice**
- an open question to patients as to whether there was anything they would like the Practice to do differently**
- opportunity for general comments**

To ensure the surveys were reaching a representative practice population and to maintain comparability between surveys it was decided to continue to collect age and gender data, and also additional demographic information regarding employment status and disability.

(b) Practice Newsletter

The PPG would like to continue with the practice newsletter, which will also help raise the profile of the group and provide patients with more information about the Practice.

Topics which should feature in the newsletter were discussed in the meeting on Thursday 17th October 2013 and the aim is that it should include :

- information about new online appointments
- information about ordering of prescriptions on-line
- information about the Clinical Commissioning Group (CCG) current activity and their proposed plans for local healthcare
- advertising for new PPG members
- information about changes to current practice staff for example currently GPs on maternity leave and locum provision)

The intention is that the next Practice Newsletter will be produced during the summer and will also include feedback from the patients raised in the survey questionnaires in 2013-14.

Step 3: Collate patient views through the use of a survey

Please see Appendix 1 for a copy of the patient survey questionnaire which was used this year. The patient survey was carried out during the months of December 2013 and January 2014.

The patient survey questionnaires were freely available in the GP patient waiting room area and the nurses' building. Also the receptionists asked each patient to complete a survey when they arrived for their appointment.

700 surveys were distributed, as requested by the PPG, and 630 responses were received. This is approximately 9% of the practice population. The winter season is a very busy period in GP Practice, and it was especially so this year following the implementation of a new computer system in September 2013 and the start of the influenza vaccination campaign, as well there being significant staffing pressures due to two of the salaried GPs starting their maternity leave unexpectedly early !

The receptionists did a sterling job and the PPG would like to thank them for their help in the distribution of the patient survey questionnaires.

The Practice would also like to thank members of the PPG, particularly Mrs Judith Webb and Mr Tony Milsom for their time collating and entering the data collected. Our thanks also go to Ms Jane Fowler for her time in creating and designing a format to enable the entering of the data, which is very clear and easy to use, and for synthesising the results in a way which has allowed the PPG to analyse the questionnaires and discuss the results in order to produce recommendations for the practice. The partners feel that the processes which have been used to sample the patients and analyse the data are sufficient to provide the "reasonable person" with confidence that the reported outcomes are valid.

Ms Fowler has also produced a readable summary of the report for patients which is available on the website. As usual copies will also be printed and displayed on the PPG noticeboard in the waiting room.

Please see Appendix 2 for the full patient survey analysis and report.

Step 4: Provide PRG with opportunity to discuss survey findings and reach agreement with the PRG on changes to services.

The draft survey report was circulated at the PPG meeting on Thursday 20th March 2014, when all the data had been collated and the information analysed. It was presented in a draft format for acceptance by the PPG. Ms Jane Fowler provided an explanation as to the process by which the patient responses were analysed and how they had been presented. The final completed survey report was received on Monday 24th March 2014.

The PPG members felt the survey had been successful once again. Patients' comments from previous surveys were implemented where possible. The Practice has had significant changes over the last six month period* and significant GP staffing difficulties during December and January** so it was reassuring to find that the % satisfaction rating (ie the % of patients rating the service provided by the surgery as good, very good or excellent) had only marginally declined from 94.2 % in 2012-13 to 93.46% in 2013-14. The tenor of the comments from the surveys was not worse than in previous years and the areas of satisfaction had not declined.

* The Practice transferred over to a new computer system on Friday 13th September 2014, which has created significant pressure on the reception staff in particular as they have tried to maintain the quality of their patient-facing role despite requiring on-the-job training both before the upgrade and post implementation.

** Two of the salaried GPs, Dr Green and Dr Phillips, both went on maternity leave in late November (considerably earlier than originally planned due to unexpected complications, but we are happy to report both mothers and babies are doing well) and Dr Cox simultaneously on paternity leave while first Dr Phillips and then their new baby was in hospital. This resulted in significant GP shortages which were not easily filled by locums at short notice, and were ongoing at the time of the PPG survey.

Issues highlighted by the survey findings.

Q1 & 2 Re Repeat Prescription Requests and On-line Ordering

The practice has always had the facility for patients to order their on-line prescriptions using the Practice website <http://www.thesurgeryparkstreet.co.uk/>

However the survey report showed that 308 out of 630 patients (49%) did not know about the online ordering system, despite the Practice's best efforts to make patients aware.

During the period in which the survey was being carried out, and as a result of the enhanced applications now available as a result of transferring to the new computer system in September, the Practice decided to offer patients not only on-line prescriptions but also on-line appointment access.

Judging by current use these services appear to be increasingly successful.

Steps have been taken to make patients aware of these services by displaying posters in the waiting room area, information on the website for direct booking of appointments and using the new facility to attach notes to patients to their repeat prescription lists when they request a prescription.

We hope to find, should this question be revisited in a future survey, that the Practice has been efficient in getting the information across.

Q3 Re Staff name badges

The PPG were keen to ask patients if they would find it helpful if staff wore name badges. Currently staff do not wear name badges but the partners had said they would be happy to consider introducing them depending on the feedback of the patients.

Only 366 (58%) of the 630 patients completing the form responded to this question. There were 106 "Yes" and 260 "No" responses.

This means that of those responding to this question approximately 30% were in favour, and 70% were not, and of the total sample this was a 17% "Yes" response.

Although the PPG members present at the discussion group remain themselves almost all in favour of introducing name badges they agreed that these results do not suggest that it matters particularly to most patients and that they could not be construed as a mandate to implement the use of name badges for all staff. It was noted that Doctors' names are on their consulting room doors and this includes changing the names when rooms are being used by other Doctors eg locums.

Q4 Re Patient Participation Group

The PPG would like to raise the profile of the group and wanted to survey patients as to whether they knew about the group.

Only 362 patients out of the 630 completing questionnaires responded to this question. Of the 362 patients responding there was an exact 50% split between those who knew of the group and those who didn't.

As mentioned previously, the PPG logo has been situated on the front page of the website and the GPs are inviting patients to join the group at appropriate opportunities during consultations.

Also there is a noticeboard in each waiting area.

However, it appears that more still needs to be done to raise the profile of the PPG.

Q5 General Comments re Overall Services

There were 627 responses out of 630 forms for Q5 of which 93.4% were rating the services good, very good or excellent.

Given the difficulties within the practice at the time the survey was conducted we feel it compares favourably with the 2013 (94.2 %) and 2012 (90%) surveys.

31% of those completing the survey made additional comments and 56% of them were positive. In other words about 86 patients made negative comments in this section - this is 13.6% of the patients completing this survey, and 1.2% of the practice population.

Q6 General Comments re anything the practice could do differently

There were only 36 responses (5.7% of survey participants) in this section, of which 22% were positive. In other words, about 28 patients made negative comments in this section - this is 0.4% of the practice population.

Q7 General Comments on any of the topics covered in the survey

There were 104 responses here of which 34% were positive. In other words about 69 patients made negative comments in this section - this is about 1% of the practice population.

This implies that a minimum of 86 patients (1.2% of the practice population) and a maximum of 183 patient (2.6% of the practice population) have problems with the service we provide.

The survey provided an opportunity for patients to add comments - please see the list attached in Appendix 3.

Ms Jane Fowler has kindly incorporated the main themes, both positive and negative, into the survey results.

She has produced a complete list of comments for the Partners to look at in more detail within the Practice, in case there are other issues which they feel need addressing and which may be explored further in future surveys.

Step 5: Agree action plan with the PRG and seek PRG agreement to implementing changes

The three points the PPG expressed to Dr Penny McEvoy in the meeting on Thursday 20th March 2014 to feed back to the partnership on Friday 21st March 2014 were :

1) Satisfaction levels are already high, so do not make many changes to the current services ; focus on maintaining the current services

2) Please develop an A4 patient leaflet for all new patients, but which can also be available to current patients, and provide it on the website as well. Use this to explain the services provided - both clinical in terms of staff and clinics, and organisational, so including information about the triage system, urgent access, appointment booking, prescription management and on-line services.

This would help address comments regarding appointments issues.

3) Reception issues are one of the themes which keep recurring in the comments section of the patient surveys and the PPG requested that the Partners should consider further how to address them, and report back to a subsequent meeting. Some of the PPG group members have offered specific support and help with that process.

Step 6 : Publicise actions taken and subsequent achievement

Summary of the achievements made in implementing the action plan for 2013-14 based on the survey from 2012-13.

Action Points 1 and 2 were to make patients more aware of the PPG group.

57% of the patients surveyed this year (2013-14) answered this question, of whom half were aware of the PPG.

The profile of the PPG has been increased by the development of a formal logo for the group and using this logo on the website as well to make the PPG section more eye-catching.

The PPG has its own noticeboard in both waiting rooms which they agreed to maintain. They agreed to answer any queries from patients which could be passed on to them via reception.

The Partners continue to encourage patients to consider joining the PPG as active or virtual members.

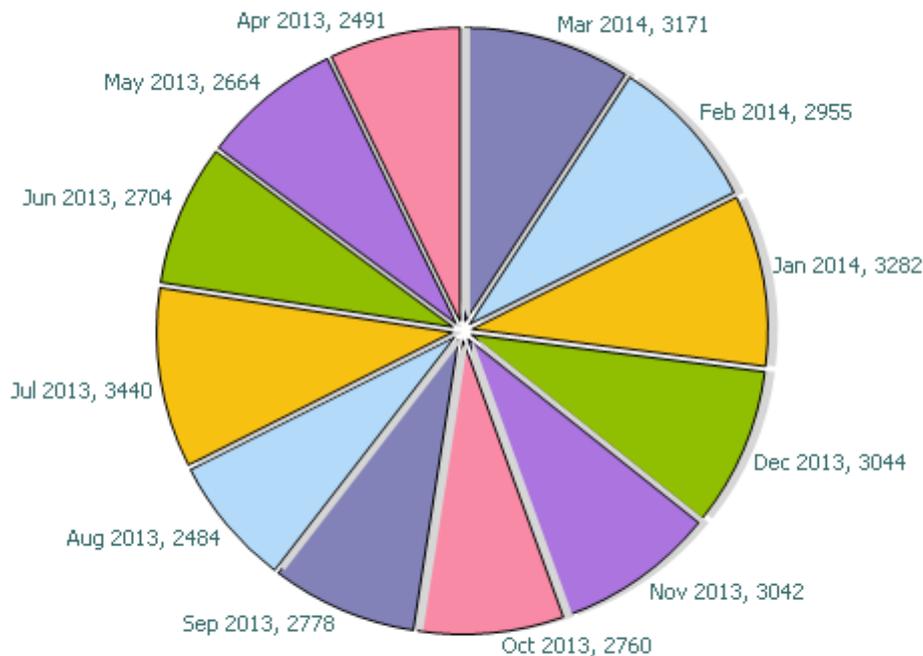
Action Point 3 was relating to maintaining and improving the triage system.

This continues to work well for most patients and the partners are committed to ensuring it improves the service which is provided to patients. It can do this by ensuring urgent problems are dealt with urgently, and by managing problems over the phone where possible which can be of great help to working patients who struggle to take time off work. It also allows the doctors to encourage continuity of patient care for non-urgent problems and to minimise the number of visits a patient might need.

Action Point 4 was related to the use of the practice website and the knowledge of the practice opening times.

The previous survey had identified a lack of knowledge of opening times despite these being published on the practice website and as laminated posters on the doors of both practice buildings. We have continued to raise the profile of the website and the facilities available through it.

**This has been successful as is demonstrated by analysis of website hits.
Repeat prescription requests in the last month using the website = 177
Unique visits to the website in the last 13 months = 34,815**



Action Point 5 was regarding the patients' desire to have greater dispensary facilities, and that these facilities should be available to local patients as well as those who live more than a mile from a pharmacy.

Unfortunately current legislation does not permit any general practice to provide dispensary facilities to patients who live within a mile of a pharmacy so we cannot act on this request at the present time.

Action Point 6 related to themes from patient comments which were discussed by the Partners and annotations to the comments published on the website.

Formal Local Patient Participation Report 2013-14

This document, meeting the specific PPG Service Specification minimum criteria, is also published on the website.

It can therefore also be viewed by the CCG and CQC.

It is supplied to NHS England as this is a mandatory requirement.

It can be published on the NHS Choices website.

The information from the survey and the analysis of the survey is printed and on display in the waiting rooms.

The report includes a summary of other mandatory information including the practice opening times, the methods of access to services throughout the core hours, and also the times at which individual healthcare professionals are accessible to registered patients including for extended hours.