

# Annex D: Standard Reporting Template

Shropshire and Staffordshire Area Team 2014/15 Patient Participation Enhanced Service – Reporting Template

Practice Name: The Langton Medical Group

Practice Code: M83030

Signed on behalf of practice: Deirdre Smouna Date: 27 March 2015

Signed on behalf of PPG: Date:

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) Information is posted on the PPG pages of our website

Number of members of PPG: 14

Detail the gender mix of practice population and PPG:

%	Male	Female
Practice	5795	6015
PRG	5	9

Detail of age mix of practice population and PPG:

%	<16	17-24	25-34	35-44	45-54	55-64	65-74	> 75
Practice	2336	1081	1416	1629	1696	1404	1293	955
PRG	0	1	2	0	0	2	5	4



Detail the ethnic background of your practice population and PRG:

	White			Mixed/ multiple ethnic groups				
	British	Irish	Gypsy or Irish	Other	White &black	White &black	White	Other
			traveller	white	Caribbean	African	&Asian	mixed
Practice	11,338	236	118	945	118	118	118	236
PRG	14	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	118	0	118	118	236	118	118	354	0	709
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:

We have revised the practice literature about the PPG and re-launched it as a virtual PPG to encourage more working age adults (who could not attend the meetings) and people from minority groups (who may feel intimidated in meetings) to join.



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:

Patient questionnaire feedback, complaints and comments.

How frequently were these reviewed with the PRG?

The action plan agreed with the PPG from the patient questionnaire feedback was published in October 2014 on the website, with hard copies in the PPG leaflet racks in the waiting rooms in both of our surgeries. Comments on the action plan were invited from the members of the virtual PPG.

In November 2014 a summary of complaints, complements and suggestions received between April and September 20214 was published on the PPG pages of our Practice website and with fliers in the PPG leaflet racks in the waiting rooms in both of our surgeries. Comments were invited from the members of the virtual PPG.



In February 2015 the Practice undertook a patient survey which included questions related to the action plan published in October 2014. The aim was to gain feedback about the Practice and the progress made on the items included in the October 2014 action plan.

In March 2015 the results of the patient survey were published on the practice website and hard copies on our reception desks and in the PPG leaflet racks in the waiting rooms in both of our surgeries. Key messages from the patient survey feedback will be considered at the Partners and managers spring business planning meeting and comments will be invited from the members of the virtual PPG on the items selected as priority areas for the next PPG action plan.



## 3. Action plan priority areas and implementation

#### Priority area 1

Description of priority area:

We need to encourage more patients and a wider range of patients to join the Patient Participation Group to ensure that the membership is representative of all our patients, for example, more working age adults and more members from groups that are often not heard.

We need to enable patients to be aware of the Patient Participation Group.

What actions were taken to address the priority?

We rewrote the information that is on the Practice website with the aim of encouraging new members.

Throughout the year we have sent MJOG text messages to all of the patients registered with the Practice, not just those patients who had joined the Virtual PPG, 1) about the launch of the virtual PPG, invite them to become members of the virtual PPG and comment on the action plan for 2014 (the action plan for was the result of feedback form our patient survey and patient comments and complaints); 2) to look at the updated PPG pages on the Practice website; and 3) to complete the patient questionnaire PPG. All of the above were accessible in hard copies in the waiting rooms at our main and branch surgeries, either on the PPG notice boards or available on the reception desks.

Despite all of the above, a report on the areas of the Practice website visited most by readers does not include the PPG pages. This is disappointing especially after all the texts that were sent to all patients, not just the members of the virtual PPG in the hope of raising awareness of the PPG amongst all of our patients. So for whatever reasons our website visitors do not visit the PPG pages frequently, perhaps more patients read the information on the PPG notice boards in the waiting rooms of both of our



surgeries.			

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

We have 14 patients who have joined the virtual PPG since it was launched in and 244 patients completed our patient survey online patient survey and 29 in hard copy. The age range of the members of our new virtual PPG is larger than the age range of the previous combined face-to-face/virtual PPG.

We published our feedback to the information gained from the patient survey in March 2015 on our website and in hard copy available in both of our surgeries.



# Priority area 2

Description of priority area:

Patients have told us that they would like appointments to be available during the middle of the day.

What actions were taken to address the priority?

We agreed that when we could we would adjust the doctors rota to provide surgeries during the middle of the day, which would increase the times when we offer appointments

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

We introduced early afternoon surgeries at our Lichfield surgery in 2014. In the patient survey we asked:

"In 2014 we introduced early afternoon surgeries at our Lichfield surgery, do you think this has made it easier to book an appointment at a time that suits you? Please click/tick one answer."

Yes: 45.15% (107) of the on-line responders and 15 of the patients who used the hard copy questionnaires

No: 18.99% (45) of the on-line responders and 7 of the patients who used the hard copy questionnaires

Don't know: 35.86% (85) of the on-line responders and 6 of the patients who used the hard copy questionnaires

We are genuinely pleased that this action has made it easier for nearly half of the responders to book an appointment at a time that suits them.

We published our feedback to the information gained from the patient survey in March 2015 on our website and in hard copy available in both of our surgeries.



# Priority area 3

Description of priority area:

Patients tell us that they have problems getting through to us on the telephone and booking an appointment

What actions were taken to address the priority?

We expect that making more appointments available in the middle of the day will make appointments more accessible to patients and thereby decrease the number of telephones patients make to the practice to book an appointment. Our patients are able to book appointments on-line and this reduces the number of telephone calls to the Practice. We have offered this facility for a number of years and it is popular amongst many patients.

We are investing in a new telephone system that will have a menu system. The existing telephone system does not have a menu system. We expect that by using the menu the amount of calls that go to the general enquiries and the appointments extensions are reduced thereby shortening the amount of time other callers wait to be answered. Unfortunately the implementation of this new system is taking longer than expected for various reasons that are not in the control on the Practice.

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

In the patient survey we asked "How do you normally book your appointment at the practice? Please click/tick all boxes that apply."

In person at the surgery

9.58% (23) of the on-line responders and 17 of the patients who used the hard copy questionnaires

By telephone

73.75% (177) of the on-line responders and 21 of the patients who used the hard copy questionnaires

16.67% (40) of the on-line responders and 4 of the patients who used the hard copy questionnaires

We were surprised that so many responders continue to book appointments by telephone especially when patients tell us how



hard it is to access us by telephone, however we were pleased to see that more of the responders book appointments using the on-line facility then in person at the surgery. These results tells us that we need to encourage on-line booking and installing the new menu driven telephone system is extremely important.

Unfortunately the installation of the new telephone system is delayed for reasons outside of our control so at this time we are not able to judge the effect it has on telephone access to appointments. When the new phone system has been installed and is bedded in we will ask patients for their feedback.

To increase access to appointments we would like to be offer more GP and nursing appointments however we are not able to do this within the current funding levels. We are looking internally at ways of reducing the amount of appointments that some patients book who come to us very frequently e.g. by adding to chronic disease invitation appointment letters that "the nurse will tell the patient in the appointment if the patient needs to see a doctor to discuss their blood results", because some patients book an appointment with a doctor for that reason, and the discussion may not be needed or could be done by telephone.

We published our feedback to the information gained from the patient survey in March 2015 on our website and in hard copy available in both of our surgeries.



### 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):

Issue 1: At times there is a long queue of patients at the front desk in the Lichfield surgery.

Action: We installed two new PCs and telephones to the side of the front desk so that the extra reception staff could take telephone calls leaving the two receptionists on the front desk to look after patients there and as a result reduce the queues.

Issue 2: Difficult for patients to get through on the telephone.

Action: As for Issue 1, a dedicated receptionist answering telephone calls should speed up our answering time and thereby allow more patients to get through to the Practice.

Issue 3: When a doctor says that he/she wants to see a patient in X amount of time, it is difficult for the patient to book an appointment at the time specified.

Action: The doctor books the appointment at the time to ensure the patient can see that doctor when specified.

Issue 4: It is difficult for patients to see the doctor of their choice.

Action: To encourage patients to book with other clinicians when appropriate, and not always with a doctor, we produced information about the roles of other clinicians. This would relieve pressure on GP appointments.

Issue 5: Patients do not know about our early morning and late evening surgeries, the services we provide and that the Practice has a website.

Action: We produced literature and information on our website that updated patients of our services and availability, and put a message on our Envisage screen to encourage patients to visit our website.

Issue 6: The need to encourage more patients to become members of the PPG.

Action: We have revised the practice literature about the PPG and re-launched it as a virtual PPG to encourage more working age adults (who could not attend the meetings) and people from minority groups (who may feel uncomfortable in meetings) to join.



## 4. PPG Sign Off

Report signed off by PPG: NO We have a virtual PPG so there is no one to sign it off

Date 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? YES by texting to all the Practice patients - please see priority 1above

Has the practice received patient and carer feedback from a variety of sources? YES from patient compliments, complaints, comments and patient surveys

Was the PPG involved in the agreement of priority areas and the resulting action plan?

Yes the former PPG was involved in setting the priorities and the priorities were posted on the PPG pages of the Practice website and all patients including those who have joined the new virtual PPG were asked to comment on the action plan of priorities.

How has the service offered to patients and carers improved as a result of the implementation of the action plan? Yes the introduction of the early afternoon GP surgeries has made appointments available at a greater variety of times. When the telephone system is implemented the telephone access for patients and carers should be improved.

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

It is a great pity that the funding for patient engagement has been decreased so significantly and it will be included in the contract in the future rather than being an enhanced service with remuneration. In the current primary care environment this arrangement may disadvantage the amount of time practices have to dedicate to patient involvement even though patient involvement is a requirement for general practices.