

Annex D: Standard Reporting Template

North Yorkshire and Humber Area Team
 2014/15 Patient Participation Enhanced Service – Reporting Template

Practice Name: Dr Bartlett and Partners. West Ayton and Snainton Surgeries

Practice Code: B82063

Signed on behalf of practice: Pam Saltmer. Practice Manager Date: 19.3.15

Signed on behalf of PPG: Mr Leo McGrory. Chair of the PPG Date: 19.3.15

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) Face to face and Email																																					
Number of members of PPG: 9																																					
Detail the gender mix of practice population and PPG: <table border="1" style="width: 100%; border-collapse: collapse; margin-top: 10px;"> <thead> <tr> <th style="width: 20%;">%</th> <th style="width: 30%;">Male</th> <th style="width: 30%;">Female</th> </tr> </thead> <tbody> <tr> <td>Practice</td> <td>3895</td> <td>4155</td> </tr> <tr> <td>PRG</td> <td>4</td> <td>5</td> </tr> </tbody> </table>	%	Male	Female	Practice	3895	4155	PRG	4	5	Detail of age mix of practice population and PPG: <table border="1" style="width: 100%; border-collapse: collapse; margin-top: 10px;"> <thead> <tr> <th style="width: 10%;">%</th> <th style="width: 10%;"><16</th> <th style="width: 10%;">17-24</th> <th style="width: 10%;">25-34</th> <th style="width: 10%;">35-44</th> <th style="width: 10%;">45-54</th> <th style="width: 10%;">55-64</th> <th style="width: 10%;">65-74</th> <th style="width: 10%;">> 75</th> </tr> </thead> <tbody> <tr> <td>Practice</td> <td>1255</td> <td>563</td> <td>614</td> <td>829</td> <td>1120</td> <td>1286</td> <td>1367</td> <td>1046</td> </tr> <tr> <td></td> <td></td> <td>1</td> <td></td> <td></td> <td></td> <td>3</td> <td>3</td> <td>2</td> </tr> </tbody> </table>	%	<16	17-24	25-34	35-44	45-54	55-64	65-74	> 75	Practice	1255	563	614	829	1120	1286	1367	1046			1				3	3	2
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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	8050							
PRG	9							

	Asian/Asian British					Black/African/Caribbean/Black British			Other	
	Indian	Pakistani	Bangladeshi	Chinese	Other Asian	African	Caribbean	Other Black	Arab	Any other
Practice										
PRG										

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:

Ethnicity is not recorded for all of our patients and indeed when asked many patients refuse to have that information recorded. However, our demographic is predominantly White British. Our practice population is rural and has a large proportion of retired people. Our PPG reflects this but we have tried to recruit some younger members and have permanent posters in all of our waiting rooms to try to reach some of these patients. It proves more difficult to recruit younger members since many patients of working age travel outside of the area to work. We have tried to vary the timings of our meetings (9.30am, 2.30pm and 6.30pm) to attract more members but this has proved unsuccessful. In order to raise the profile of the PPG we are in the process of preparing information boards with photographs of members etc. and these will be displayed in waiting areas. It is hoped that by doing this we might be able to recruit more members to the group.

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:

Our PPG reviewed the patient questionnaire which was sent out at the beginning of 2014 and addressed any issues which arose from that – this was in our March 2014 report. We have now put in place the Friends and Family Test and the PPG have discussed how this had been received and any issues arising. We have discussed ways to encourage patients to use NHS Choices and feedback to CQC. At our next meeting we intend to discuss any suggestions received in our waiting room boxes.

How frequently were these reviewed with the PRG?

CQC and patient feedback is a standing item on all of our PPG agendas – we meet every 8 weeks so there is always an opportunity to discuss this. Representatives are sometimes asked by individual patients to feed back to the group which is done respecting patient confidentiality.

3. Action plan priority areas and implementation

Priority area 1
<p data-bbox="203 389 589 421">Description of priority area:</p> <p data-bbox="203 464 1995 568">Many patients have approached members of the PPG with concerns about the closure of the local walk in centre. Long discussions were had about the CCG's urgent care review which would incorporate a walk-in centre. The PPG felt that it was a priority to ensure that patient's wishes were heard.</p>
<p data-bbox="203 686 889 718">What actions were taken to address the priority?</p> <p data-bbox="203 761 2029 865">All members of the PPG attended the various information giving events organised by the CCG during the consultations. The PPG helped to ensure that patient's views could be channelled through them and they raised those at the events. Posters were put up in all waiting rooms encouraging patients to put forward their views and to attend the public events.</p>
<p data-bbox="203 1021 1317 1053">Result of actions and impact on patients and carers (including how publicised):</p> <p data-bbox="203 1096 2040 1200">PPG members were able to put their concerns to the CCG before the awarding of the contract. They felt that the closure of a town centre walk in centre was a retrograde step as this is now to be provided at the hospital rather than having a town centre presence.</p>

Priority area 2

Description of priority area:

Links with Derwent Valley BRIDGE and Healthwatch

What actions were taken to address the priority?

The PPG have forged links with both of the above organisations and have ongoing discussions.

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

Several PPG members are also on the boards of these groups and therefore links with the surgery have been valuable in assuring the patients' needs are highlighted when areas of development are discussed. We are currently looking to put in a joint bid with the BRIDGE for funding for a health and wellbeing project which will benefit the patients of Derwent Ward and therefore patients of the practice.

Priorities for this bid are being discussed at our next meeting. It is hoped that this project will enable us to reach patients in seldom heard groups and those who do not normally come to the practice on a regular basis.

Priority area 3

Description of priority area:

Breast Screening for Practice Patients.

What actions were taken to address the priority?

In the past the Breast Screening unit has been situated at the surgery (every 3 years for a period of 10 weeks) This year the practice had taken the decision that it can no longer offer this service as the units have increased in size and it would take up too many parking places. This is coupled with the increase in practice and attached staff who use the care park and therefore it was felt that the hosting of the unit would prove a health and safety risk to people attending it. The service was therefore moved to the hospital. The PPG members had received several comments from patients about this as they felt that this was inconvenient and costly as they have to pay for parking at the hospital. The PPG discussed ways to feed back to patients and to enquire if there might be another site in the area which would be more convenient than the hospital.

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

The PPG approached the breast screening service with suggestions of local sites which they might like to approach and the service are investigating these options for the next round of screening. Members of the PPG have also spoken to the owners of various sites and to the parish councils so that this can be planned in advance of the next round of screening.

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):

The main theme and outcome of our patient surveys over the past 3 years has been patient dissatisfaction with the inequity of patient choice for patients who would like to use the dispensing services provided by the practice. Currently patients who live within 1.6k of the pharmacy in East Ayton are not allowed to use the practice dispensary for their medication.

Building on action plans from recent years, the PPG have worked constantly to try to lobby for this situation to be changed. This is a national issue and the PPG, in collaboration with the local Parish Councils, have put forward the patient's case to their Local MP, to Constance Pillar, Assistant Head of Primary Care, NHS England and to the National Pharmaceutical Society. The PPG have promoted the cause by ensuring that patients have a right to be heard during the consultation of the Pharmaceutical Needs Assessment. The group are awaiting a reply from Constance Pillar on the concerns expressed by patients and have provided statistical evidence of the poor usage of the local pharmacy as this is still being boycotted by local patients. The Group have been successful in bring this issue to the attention of the Pharmaceutical Committee and it's comments have been included in the Pharmaceutical Needs Assessment :

This link will take you to the published PNA for North Yorkshire.

<http://www.nypartnerships.org.uk/CHttpHandler.ashx?id=30543&p=0>

pages 67, 68, 71, 72, and 73 carry references about GP dispensing, the 1.6km rule and concerns about the impact on rural practice patients.

The group are often concentrated on areas of patient care which are provided for patients of the practice by the wider health economy and have worked tirelessly with Healthwatch and other organisations to improve patient care.

The PPG have been a great asset to the practice and this was reflected in our last CQC visit report.

4. PPG Sign Off

Report signed off by PPG: YES

Date of sign off: 19.3.15

How has the practice engaged with the PPG:

How has the practice made efforts to engage with seldom heard groups in the practice population?

The practice have posters in waiting rooms asking for comments about the service provided at the practice and Friends and Family comments are collated from waiting rooms and various websites including NHS Choices and CQC. Patients are encouraged to join the PPG if they wish to.

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

Yes – as above.

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

The actions of the PPG are discussed at each meeting and have many ongoing priorities.

How has the service offered to patients and carers improved as a result of the implementation of the action plan?

The focus of the PPG is completely on improving the service provided to patients of the practice. There have been many examples of how this has proved successful.

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

The PPG is a valuable addition to the service provided by the practice and allows patients to feed-back comments in a confidential and supportive way.