Kent & Medway Area Team

2015/16 Patient Participation Enhanced Service – Reporting Template

Practice Name: Wigmore & Hempstead Medical Centres

Practice Code: G82226

Signed on behalf of practice:  Date: 31/03/2016

Signed on behalf of PPG: Email confirmation of sign off by PPG Members Date: 31/03/2016

1. Prerequisite of Enhanced Service – Develop/Maintain a Patient Participation Group (PPG)

**For reporting purposes statistics and information provided includes details, demographics and opinions of patients registered at both our Wigmore and Hempstead sites.**

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| Does the Practice have a PPG? YES / NO - **YES** |
| Method of engagement with PPG: Face to face, Email, Other (please specify) **Face to face and Email** |
| Number of members of PPG: 8 |
| Detail the gender mix of practice population and PPG:

|  |  |  |
| --- | --- | --- |
| % | Male  | Female  |
| Practice | 2315 | 2332 |
| PPG | 5 | 3 |

 | Detail of age mix of practice population and PPG:

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| % | <16 | 17-24 | 25-34 | 35-44 | 45-54 | 55-64 | 65-74 | > 75 |
| Practice | 736 | 375 | 516 | 546 | 604 | 659 | 696 | 472 |
| PPG |  | 1 |  |  | 1 |  | 2 | 4 |

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| Detail the ethnic background of your practice population and PPG: **We are still collecting the full data for patient ethnicities within the practice so have left the marked as N/A (not available) as we do not have a true reflection of the practice patient ethnic groups. We do have patients registered from all ethnic backgrounds.**

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|  | White | Mixed/ multiple ethnic groups |
|  | British | Irish | Gypsy or Irish traveller | Other white | White &black Caribbean | White &black African | White &Asian | Other mixed |
| Practice  | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A |
| PPG | 6 |  |  |  |  |  |  |  |

|  |  |  |  |
| --- | --- | --- | --- |
|  | Asian/Asian British | Black/African/Caribbean/Black British | Other |
|  | Indian | Pakistani | Bangladeshi | Chinese | Other Asian | African | Caribbean | Other Black | Arab | Any other |
| Practice | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A |
| PPG |  |  |  |  |  |  | 2 |  |  |  |

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| 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 tried to connect with all members of the practice population regardless of age, gender or ethnic origin. The current PPG is made up of patients who are committed to attending as many of the PPG meetings as they are able to. The Practice has created a dedicated room for PPG members to hold their meeting which has given us more flexibility to offer meeting times that will enable a wider demographic of patients to attend. The current PPG is constantly looking at ways of engaging with a wider range of the practice population. We have adverts on our website, notices within the practice, messages within the Friends and Family Test and some members of the PPG actively approach other patients whenever they are in the surgery to promote the PPG and what it does. We are in the process of setting up a virtual PPG where members can take part via email. This will run alongside our physical PPG 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? **None of which we are aware.**If you have answered yes, please outline measures taken to include those specific groups and whether those measures were successful: **Our Practice population is varied with patients from all ethnic backgrounds, widespread age ranges, patients in nursing homes, care homes and parents with children of school age to name a few.**  |

1. Review of patient feedback

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| Outline the sources of feedback that were reviewed during the year:**The PPG worked with the practice to improve the current Friends and Family test survey so that we obtained additional views on patients opinions about our practice. It was decided to target a variety of patient groups across both branches and in order to keep the survey anonymous we used different coloured paper for surveys sent to each patient group. The only other identifier was the name of the branch written at the top of the survey. The patient groups targeted were: 18-25 year olds, patients with 5 or more visits to the surgery in the past 12 months and all other patients visiting the practice. When the surveys were posted out we also sent an additional letter inviting patients to join our PPG either physically or virtually. Disappointingly there has been no uptake on this.****18-25 year olds – 50 surveys sent out; 5 returned; 2 Hempstead patients; 3 Woodside patients.****Patients with 5+visits in 12 months – 25 surveys sent out; 18 returned; 3 Hempstead patients; 15 Woodside patients.****Patients visiting the practice – 13 responses****36/88 responses = 41% response rate****Comments received from patients included:****More parking required at Hempstead; Longer opening hours; More nurse appointments at Hempstead; The service is extremely good and reliable;****Receptionist helpful and kind** |
| How frequently were these reviewed with the PPG?**We have held 6 PPG meetings across the year where we have discussed all aspects or surgery life, how it affects patients, surgery staff and why the PPG is so important. The PPG has worked with the practice to review our FFT data, help promote changes and the introductions of new processes and all current members have been committed to attending as many of the meetings as possible. Thoughts and ideas have been exchanged through the Practice Manager via email in between meeting dates.** |

1. Action plan priority areas and implementation

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| Priority area 1 |
| Description of priority area: **Raising patients’ awareness of dementia from the perspective of the patient and the carer.** |
| What actions were taken to address the priority? **The topic has been discussed at several PPG meetings. A representative from Bluebird Care attended on 23rd April 2015 to give a talk to the PPG about dementia.** |
| Result of actions and impact on patients and carers (including how publicised): **The PPG met with the Bluebird care representative and following the presentation given to the group it was deemed that they would not meet the requirements of the PPG’s aim. This is an area that the PPG are still keen to follow up with and members will be attending a presentation on 16th April 2016 with another service to see if we can engage them to help us.** |

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| Priority area 2 |
| Description of priority area: **Engaging a wider range of our patient group** |
| What actions were taken to address the priority? **The PPG and Practice decided to target specific groups with their patient survey to try and engage a wider population. Surveys and letters were targeted to 2 main groups 18-25 year olds and patients who had made 5 or more visits to the surgery in the previous 12 months. Letters were sent inviting patients to join a virtual PPG where we would contact them via email and invite their views on the same areas as the physical PPG.** |
| Result of actions and impact on patients and carers (including how publicised): **Disappointingly we have had a zero uptake in the virtual PPG. It will be one of our key areas to continue to develop over the next 12 months as the PPG feel it is important to obtain the views of a wider practice community. It has been decided that we will introduce a Practice Newsletter. Members of the PPG will take on an article each and use this as a platform to reach out to all patients.** |

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| Priority area 3 |
| Description of priority area: **Better use of GP appointments by patients** |
| What actions were taken to address the priority?**The PPG has had discussions over how to improve appointment availability for patients. The practice has now employed an Advance Nurse Prescriber for 2 sessions per week to see patients with minor ailments and do medication reviews and Dr R Patel has increased the amount of patients she sees per session.****The PPG felt it would also be a good idea to implement some sort of patient information board targeting specific minor illness like coughs, colds and sore throats with better highlighted advice on self-management.** |
| Result of actions and impact on patients and carers (including how publicised):**There are more appointments available to patients and with the introduction of the Nurse prescriber she is seeing minor ailment cases leaving the GPs free to see the more complex patients. We are looking at increasing the amount of sessions of our Nurse Prescriber further in the near future. The Practice Manager is looking at publicising the availability and positive uses of the Nurse Prescriber on our website and in the practice.** |

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 Practice was recognised for our involvement with the PPG at our CQC inspection in May 2015 which helped us to obtain our GOOD rating. The PPG have continued to look at ways of engaging a wider variety of our practice population, support the practice in the introduction of online services and bring important subjects like dementia to the forefront for patients to seek further information. Online services are proving successful with an increased uptake in patients booking appointments and ordering prescriptions online. We are now moving forward in 2016/2017 with access to detailed care records.**

**Our initial enquiries to be able to offer coffee afternoons with specialist speakers in targeted areas of healthcare have been unsuccessful due to the speakers not being suitable for the format we were looking at; however, not to be deterred the PPG are looking into this further and are hoping to bring this to patients for 2016/2017.**

**The efforts to engage a wider variety of patient groups and especially those less represented i.e. 18-25 year olds has also proved difficult. This PPG is continuing to look at better ways to converse with patients and it is hope that a practice newsletter and coffee afternoons will also help with this.**

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| 1. Action Plan for 2016-2017
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| * Introduce a Practice Newsletter
* More publicity using notice boards and the surgery website for sign posting to services for self-management of minor ailments and the benefits of not having to see the GP
* Coffee afternoons with key speakers in areas of healthcare for patient information
* Continue to develop a virtual PPG for the benefit of the wider practice population

Do you have any other comments?**The PPG congratulated the Practice, Staff and Patients on receiving a “GOOD” rating from CQC. It recognised the hard work put in by everyone concerned. CQC standards to obtain an “OUTSTANDING” rating are extremely high however this is something that the Practice and the PPG are committed to working on to achieve and we would like to obtain OUTSTANDING in at least one area.** |