

Annex D: Standard Reporting Template

NHS Greater Manchester  
2014/15 Patient Participation Enhanced Service – Reporting Template

Practice Name: **The Poplars Medical Centre, Swinton**

Practice Code: **P87002**

Signed on behalf of practice:

**Mrs Bharti Mistry**

Date: **18<sup>th</sup> March 2015**

Signed on behalf of PPG:

**Mrs Marion Malone**

Date: **24<sup>th</sup> March 2015**

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

Does the Practice have a PPG? <b>YES</b>																																					
Method of engagement with PPG: Face to face, Email, Other (please specify) <b>Face to Face</b>																																					
Number of members of PPG: <b>9</b>																																					
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Detail the ethnic background of your practice population and PRG: - **Only 790 records contain an ethnicity and the figures below are based on this**

	White				Mixed/ multiple ethnic groups			
	British	Irish	Gypsy or Irish traveller	Other white	White &black Caribbean	White &black African	White &Asian	Other mixed
Practice	<b>253</b>	<b>10</b>	<b>0</b>	<b>34</b>	<b>5</b>	<b>6</b>	<b>3</b>	<b>2</b>
PRG	<b>9</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>

	Asian/Asian British					Black/African/Caribbean/Black British			Other	
	Indian	Pakistani	Bangladeshi	Chinese	Other Asian	African	Caribbean	Other Black	Arab	Any other
Practice	<b>13</b>	<b>20</b>	<b>4</b>	<b>25</b>	<b>4</b>	<b>47</b>	<b>7</b>	<b>3</b>	<b>0</b>	<b>67</b>
PRG	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>

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:

An advertising campaign continues to run within the practice, on the practice website and via notices in the waiting areas for our PPG.

The PPG acknowledged the practice's attempt to recruit group members and felt strongly that further recruitment was essential if the group was to be truly representative of the practice population. Previously, it was unanimously agreed, in partnership with the practice, to seek to extend the membership of the group to a maximum of ten individuals. It was suggested that this might be considered at the earliest opportunity and undertaken if feasible by all or any of the following methods :-

- Word of mouth
- Further notification within the surgery/practice, including the possible use of the practice web-site, standard information notice boards and the television information/ advertising system within the surgery waiting areas.

We now have 9 patients on our PPG panel, although none fall within an ethnic minority or the younger age group. However, we continue to resolve this by clinicians actively encouraging patients to join the PPG group. We have also tried to stagger the times of the meetings to make it more convenient for the group members to attend.

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:

Paper based survey

Complaints

Suggestion Box

Patient feedback emails via practice website

How frequently were these reviewed with the PRG?

Ideally Quarterly. If not then at the PPG group meetings.

Paper survey annually.

### 3. Action plan priority areas and implementation

Priority area 1
<p>Description of priority area: Car parking Car parking was an issue at the practice, with District Nurses, Health Visitors and people from the council offices parking at the practice. The practice had provided photographic evidence of the cars parking at the practice to Swinton Clinic and the council office in the hope of stopping people parking but to no avail.</p>
<p>What actions were taken to address the priority?</p> <p>Prominent Car Park usage signs have been erected in the car park. High visibility jackets have been purchased and staff have patrolled the car park which has resulted in some inappropriate parking and seems to have had a degree of positive effect</p> <p>Salford City Council and SRFT have been notified of inappropriate usage of the car park by their staff members and the CCG had been approached regarding this issue.</p> <p>A member of the PPG group volunteered to undertake to patrol the car park if required.</p>
<p>Result of actions and impact on patients and carers (including how publicised):</p> <p>Less patients being delayed for their appointments. More parking spaces available for the elderly and infirm on the top level car park.</p> <p>This will be published on the practice website and within the practice on our community noticeboard</p>

## Priority area 2

Description of priority area:

Appointments - patient feedback from previous survey and review of appointment system identified that patients wanted "same day" appointments

What actions were taken to address the priority?

One GP has all their appointments as bookable "on the day" only, every day.  
Additional sessions are "on the day" on Monday's and Friday's to match capacity with demand

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

Patients are able to obtain an appointment on the same day as they require.

Patient satisfaction has improved and has been demonstrated in this year's patient survey

This will be published on the practice website and within the practice on our community noticeboard

### Priority area 3

Description of priority area:  
Recruitment to the PPG

What actions were taken to address the priority?

PPG members and the practice actively sought to recruit new members to the group, with promotion on the practice website, in-house consultations with GPs and nurses and within the practice.

Patients who expressed dissatisfaction with NHS services were invited to join the group by the GPs

Engagement issues with young people were discussed and it was acknowledged that this could be problematic. It was generally felt that group members should be aged 18 or over. It was acknowledged that the timing of future meetings may be influential in the recruitment process and the practice agreed that they would accommodate infrequent, after hours meetings if requested to do so.

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

The PPG will allow interested patients to be actively involved in the running of the practice and helps them to understand the healthcare Service.

It will allow them to voice their opinions, and those of the wider patient community on the service we provide, and local community matters.

Many benefits were identified, including:

- Smoking policy for E-cigarettes
- Did not attend policy/rates
- Car parking during adverse weather conditions
- Zero tolerance policy
- Community noticeboard
- remote controlled doors \_Dependent on improvement grant availability
- raising patient awareness to concerns within the wider community

## 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):

2012/2013

1. Confidentiality - The group felt that patient's confidentiality was being affected at the reception desk, as other patients who were waiting were very close to the reception desk and there wasn't enough privacy.

The practice has tried to rectify this problem by putting up signs on the desk asking patients to please wait away from the reception desk until they are called; this had some success but did not fully solve the problem.

The practice underwent some refurbishment which included new flooring in the main waiting area. Markers were put down on the flooring to indicate where patients should wait when queuing at the reception desk. This has proven to address the confidentiality issue.

2. Patients wishing to speak to reception staff in private - It was mentioned that some patients do not wish to discuss their problems at the main reception desk if they are of a sensitive nature.

The practice has a separate reception area which is for wheelchair users, but this can also be used for patients wishing to speak privately to the receptionists.

3. Staff photographs and name badges - The group felt they would like to have all the doctors and practice staff to have a notice board in the reception with their photographs on. They also felt they would like the staff to have name badges so they knew who they were dealing with.

The practice discussed this matter and has opted not to have photographs of the staff on display in reception. Photographs of the GP's are available on the website, but the practice staff did not want their photographs on display. A large majority of our staff live locally and didn't feel this was appropriate. Name badges for the admin staff have been purchased just to include their first names.

2013/2014

1. Use of community publications and resources for promotion - The information board is now in place and situated to the left of the reception area. The practice meets regularly with members of the Salford Health Improvement Team (although contact frequency with the practice will be reduced in the future due to planned service review and cost savings). This year's patient survey results indicate that patients would use the noticeboard and therefore Information will continue to be posted and updated regularly.
2. Reviewing the appointment system – The appointment system was monitored and reviewed to establish areas of high demand. As a result of this along with the responses from the patient survey, the capacity of “on the day” appointments was significantly increased.
3. Reviewing the phone system – The practice looked at the possibilities of implementing a queuing system on the phones system if possible, however this would prove too costly, hence the promotion of online booking was adopted as an alternative. This has proven to be popular and is widely used.

#### PPG Sign Off

Report signed off by PPG: YES/NO

Date of sign off: **24/03/2015**

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 PPG is advertised to all patients via noticeboards in the practice, via the practice website and are invited to join the group opportunistically by all clinicians

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

Yes. The new Friends and Family test is available to all patients via the text messaging service and in paper format at the practice. Patients are able to submit complaints and comments via the practice website and post comments on NHS choices.

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?

Patients can now obtain a same day appointment much more quickly than in previous years and can access appointments using a variety of

booking facilities available at the practice. 24/7 automated phone system, online booking, face to face & telephone.  
Patients are less stressed when arriving for appointments as they no longer have to wait long in the car park for a free space.

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

The practice and PPG continue to work consistently in all areas and our members are becoming increasingly more proactive in their role.