

Patient Participation Reporting Template 2014-2015

Practice details: **Widcombe Surgery**

Practice code: **L81020**

Stage one – validate that the patient group is representative

Demonstrates that the PRG is representative by providing information on the practice profile:

Does the Practice have a PPG	YES
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Practice population profile	PRG profile	Difference
Age		
% 18 – 24 - 9%	% 18 – 24 – 0%	9%
% 25 – 34- 14%	% 25 – 34 – 0%	14%
% 35 – 44 – 15%	% 35 – 44 – 8%	7%
% 45 – 54 – 16%	% 45 – 54 – 8%	8%
% 55 – 64 – 13%	% 55 – 64 – 13%	0%

Practice population profile	PRG profile	Difference
%65 – 74 - 9%	%65 – 74 - 17%	8%
%75 – 84 – 5%	%75 – 84 – 29%	24%
% Over 85 – 3%	% Over 85 – 25%	22%
Ethnicity		
White	White	
% British Group - 87%	% British Group -85% 15% did not wish to state their ethnicity	2%
% Irish – 0.49%	% Irish -0	0.49%
Mixed	Mixed	
% White & Black Caribbean – 0.27%	% White & Black Caribbean -0	0.27%
% White & Black African – 0.11%	% White & Black African -0	0.11%
% White & Asian – 0.34%	% White & Asian -0	0.34%
Asian or Asian British	Asian or Asian British	

Practice population profile	PRG profile	Difference
% Indian – 0.34%	% Indian -0	0.34%
% Pakistani – 0.03%	% Pakistani -0	0.03%
% Bangladeshi – 0.03%	% Bangladeshi -0	0.03%
Black or Black British	Black or Black British	
% Caribbean – 0.09%	% Caribbean -0	0.09%
% African – 0.17%	% African -0	0.17%
Chinese or other ethnic Group	Chinese or other ethnic Group	
% Chinese – 0.48%	% Chinese -0	0.48%
& Any Other – 10%	& Any Other -0	10%
Gender		
% Male -52%	% Male -31%	21%
% Female -48%	% Female -69%	-21%

<p>Differences between the practice population and members of the PRG</p> <p>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:</p>	<p>In order to obtain a representative sample of patients, we</p> <ul style="list-style-type: none"> ◆ explain the benefit of the group to new patients registering with the practice enclosing a flyer into the new patient registration pack ◆ our website advertises this initiative ◆ together with our Friends group we distributed leaflets and recruited new members ◆ displayed flyers in the surgery's waiting rooms - this is ongoing ◆ we distributed leaflets via the Health Visiting team <p>We feel that we are under- represented in some of the younger age groups and under by the ethnic minorities. We reach out to all areas of the community; however despite various attempts to target these groups, our response remains low.</p>
<p>Are there any specific characteristics of your practice population which means that other groups should be included in the PPG? Eg a large student population, significant number of Jobseekers, large numbers of nursing homes, or a LGBT community</p> <p>NO</p>	<p>If you have answered YES, please outline measures taken to include these specific groups and whether those measures were successful:</p>
<p>Is the group virtual or face-to-face?</p>	<p>Both, however mainly email (virtual)</p>
<p>How many members are there on the PRG?</p>	<p>52</p>

Step 2 – Review Patient Feedback	
Outline the sources of feedback that were reviewed during the year:	<ul style="list-style-type: none"> • Request for a hand rail to be fitted to the outside steps leading down from the car park and the use of a warning line system for fall protection to be painted to the edge of the steps • Provide a friendlier telephone answering service • Lack of patient car parking • Request to have a wall clock placed in the upstairs waiting room • Website update
How Frequently were these reviewed with your PRG	Members of the committee meet with one of the partners and the Practice Manager on a regular basis, once a month. The full committee members also meet on a regular basis and will include a number of practice patients to canvas their opinions.
Priority Area 1	
Describe the priority area:	To provide additional car parking spaces for patients.
Why was this priority identified:	Parking is limited in and around the city of Bath; and the lack of patient car parking spaces had been highlighted in a previous report. However, the practice was unable to address this issue at that time, as it was outside of their remit due to planning restrictions
What actions were taken to address this priority	The practice had the opportunity to address the issue of the lack of patient car parking spaces once again.

	<ul style="list-style-type: none"> • Application was made to the planning department to propose using a derelict area of land behind the surgery as a car park. • Following lots of liaison between the surgery and the council planning permission was granted. • Building finally got underway.
<p>What were the results of the actions and what impact on patients and carers.</p>	<p>As a result we now have a valuable extension to our existing patient car park allowing more spaces and allowing for more convenient access to the surgery</p>
<p>How was this publicised.</p>	<p>Word of mouth, posters, PPG</p>

Priority Area 2	
Describe the priority area:	Hand rail fixed to the steps leading down from the patient car park & white lines painted on the edge of each of the steps to act as a warning system for fall protection.
Why was this priority identified:	<p>The hand rail had been requested at an earlier date - as stated in a previous report. The partners discussed it at that time and agreed that it was not an immediate priority as there is a railing attached to the side of the wall, which could be gripped by way of support; the suggestion would be reviewed in 12 months.</p> <p>The request was raised once again by the committee; and agreement was reached by the partners to have the hand rail installed. At the same time the committee also requested white lines to be painted to the edge of each step as a warning device for fall protection.</p>
What actions were taken to address this priority	This was discussed by the partners; and agreement was reached to have the hand rail installed together with the edge of the steps painted with the white lines.
What were the results of the actions and what impact on patients and carers.	<ul style="list-style-type: none"> • The hand rail was successfully installed. • The contractor intended to use Industrial hot paint to the edge of the steps, which has a heat curing formula that once cured, forms a hard, long lasting finish that will not chip or flake. However, the contractor experienced difficulties obtaining the hot paint. After a short delay the job was completed. • Positive feedback was received from patients, carers and staff.
How was this publicised.	Word of mouth, poster, PPG

Priority Area 3	
Describe the priority area:	Review the telephone answering service.
Why was this priority identified:	The committee members brought this issue to our attention as it was felt that a more friendly approach could be adopted.
What actions were taken to address this priority	The comment will be discussed as an agenda item by the whole practice team at our next full practice meeting.
What were the results of the actions and what impact on patients and carers.	If there is agreement to change the greeting then the timescale for implementation will be approximately 2 – 3 months.
How was this publicised.	Word of mouth, PPG newsletter.
Progress on previous years	
If you have participated in this scheme for more than one year, outline progress made on the issues raised in the previous year (s)	
<p>Year 1:</p> <ul style="list-style-type: none"> • Implemented additional staff training to enhance our current in-house training programme. • Installed a new website hosting features to enable the user to view it in over 40 different languages via Google translate. Our patients were able to book appointments online, order prescriptions and new patients could pre-register on line. <p>Year 2</p> <ul style="list-style-type: none"> • Installed a multilingual option touch check-in screen in the waiting room allowing patients the opportunity to “self check-in.” • In keeping with giving patients a good service we installed a display signage system in the waiting room. This allows us to broadcast messages and can be used for education opportunities. • We employed a Nurse Practitioner to work alongside the GPs to help diagnose common illnesses experienced by most people from time to time. <p>Year 3</p> <ul style="list-style-type: none"> • A change in the level of the floor in the waiting room resulted in a slope. To improve the visibility of the slope a different coloured floor thread was put down. 	

- Telephone consultations were introduced as it was felt to be important due to a number of factors including access and consumer demand. The benefit to patients is often perceived as quicker and more convenient whilst receiving safe and high quality care.
- In house staff training continues. We were fortunate to have a member of staff who is qualified in training delivery and planning and so objectives were defined to meet our needs.

PPG Sign Off	
Has the report been signed off by the PPG	Yes
What date was this report signed off:	18/03/2015

How has the practice engaged with the PPG
<p>How has the practice made efforts to engage with seldom heard groups in the practice population?</p> <ol style="list-style-type: none"> 1. To try to understand them individually; and tailor involvement accordingly. 2. By finding out how they like to get involved. 3. Try to understand their needs and priorities.
<p>Has the practice received patient and carer feedback from a variety of sources</p> <p>Our feedback has consisted of the views and opinions of patients and carers. In particular our patient experience surveys proved to be a good method of gathering feedback. We were able to identify patterns and trends to see how common certain experiences were.</p>
<p>How was the PPG involved in the agreement of the priority areas and the resulting action plan?</p>

The work was undertaken in parallel with patient involvement. Recognising that many patients can contribute to developments by working together to make the most of views and opinions; and to be as effective as possible.

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

By identifying and demonstrating the problem. All improvement is change but not all change is improvement, so by trying to build on what is in place already; and by raising the awareness from the patient and carers point of view has given us the opportunity to discover what really makes the difference.

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

The practice hopes our structure with the Friends of Widcombe Surgery (PPG) will continue to reflect the views of patient groups within the practice and enable feedback from the whole practice population where possible.

It has been a busy year for the practice and we are grateful for the support the Friends of Widcombe Surgery (PPG) has given us, in particular MD & BR.

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