

West Yorkshire Area Team
2014/15 Patient Participation Enhanced Service – Reporting Template

Practice Name: Colne Valley Family Doctors

Practice Code: B85011

Signed on behalf of practice: Kirsty Hull Date: 19.3.2015

Signed on behalf of PPG: Dennis Killin Date: 26.3.2015

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

Does the Practice have a PPG? <i>YES</i>											
Method of engagement with PPG: <i>Face to face quarterly meetings. Papers are also sent electronically for members to comment on if they cannot attend the meetings.</i>											
Number of members of PPG: <i>There are 20 members that are invited to meetings and on average we have between 5-8 members at each meeting.</i>											
Detail the gender mix of practice population and PPG:					Detail of age mix of practice population and PPG:						
%	Male	Female	%	<16	17-24	25-34	35-44	45-54	55-64	65-74	> 75
Practice	<i>51</i>	<i>49</i>	Practice	<i>18.5</i>	<i>8</i>	<i>12</i>	<i>15</i>	<i>15.5</i>	<i>13</i>	<i>11</i>	<i>7</i>
PRG	<i>65</i>	<i>35</i>	PRG	<i>0</i>	<i>0</i>	<i>5</i>	<i>10</i>	<i>10</i>	<i>15</i>	<i>60</i>	<i>0</i>

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	95.1	0.11		0.43	0.10	0.05	0.02	0.06
PRG	100							

	Asian/Asian British					Black/African/Caribbean/Black British			Other	
	Indian	Pakistani	Bangladeshi	Chinese	Other Asian	African	Caribbean	Other Black	Arab	Any other
Practice	0.11	0.08		0.06	0.13	0.21	0.04		0.02	3.4
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:

The Patient Reference Group which was established in June 2011 and members were recruited through in house advertising and website explanations. Posters were displayed the village pharmacy and library. This recruitment campaign continues and the group meets regularly at the surgery.

The practice has been concerned that although the group is representative with regard to ethnicity it is not representative as far as age is concerned. Various attempts have been made to redress this imbalance including sending mail shots to younger patients and giving all new patients details of the group with the registration pack.

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

2. Review of patient feedback

Outline the sources of feedback that were reviewed during the year:

This has been year of change for the Practice including a Partner and Practice Manager leaving, merger with another local practice and potential relocation.

Communication to patients regarding the merger and potential relocation has been key for Colne Valley Family Doctors and posters/information has been available in the waiting rooms and on our website. Patients have been encouraged to feedback using comments cards/questionnaires both in the waiting room and via our comments section of the website. This feedback has been reviewed on an ongoing basis and comments back from the Practice have been posted in both the waiting room and on the website.

The Friends and Family Test (FFT) has also been implemented for the Practice and patients are encouraged to complete the questionnaire which again is available in Practice and online.

How frequently were these reviewed with the PRG?

Both the patient consultation phase of the merger and the FFT have been reviewed at each PPG meeting since the project began, this being from July 14 for the merger and October 14 for the FFT.

3. Action plan priority areas and implementation

Priority area 1
<p data-bbox="203 389 584 421">Description of priority area:</p> <p data-bbox="203 464 987 496"><i>Improved disability Access for patients into the surgery.</i></p>
<p data-bbox="203 576 887 608">What actions were taken to address the priority?</p> <p data-bbox="203 647 2033 826"><i>Currently there is a ramp and disabled access into the Practice on the basement level. Unfortunately from the basement level there is no access to the upper levels without using stairs. The previous Practice Manager looked into purchasing a lift and had a few companies quote on the project. The company that was chosen to install a patient lift came back and re-quoted for the work at an increased cost. Funding wasn't available to help the practice with this improvement and cost was too great for the Practice to bear.</i></p> <p data-bbox="203 871 1995 938"><i>Patients that now need help accessing the building can either be seen in the consulting rooms on the basement level or can be helped into surgery via an access door into a consultation room up the adjacent street.</i></p> <p data-bbox="203 983 2018 1050"><i>The Partners are aware that this is not sustainable and wish to offer a better level of care for our patients and disability access is one of the reasons for the potential relocation to a one level site in the village.</i></p>
<p data-bbox="203 1134 1312 1166">Result of actions and impact on patients and carers (including how publicised):</p> <p data-bbox="203 1206 1989 1273"><i>Not being able to install a lift has continued the access problems for patients. However, patients have been informed of where they can access the building and if they need help how to get that.</i></p> <p data-bbox="203 1318 1989 1385"><i>Information has also been publicised in the waiting room and website on the potential relocation and timescales if the business case is agreed.</i></p>

Priority area 2

Description of priority area:

Communication to patients via SMS.

What actions were taken to address the priority?

The host of the clinical system was contacted to see if this functionality was available. EMIS Web said it was but was in the embryonic stage and they had been having some issues.

The Practice switched on this functionality but it became apparent that there were a number of glitches in the system and patients were receiving incorrect SMS texts or duplicate texts. It was agreed to switch off this functionality until the system was fixed.

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

This had a negative impact on patients. They liked the idea but unfortunately due to the glitches, the text system became problematic.

However, due to the merger with another local practice, this has led to an agreement that the clinical system will be changed at Colne Valley Family Doctors so that both sites are on one system.

This system currently has SMS functionality that works, so once installed this will be switched on. The time frame for the new system is summer 15.

Priority area 3

Description of priority area:

Loop system for practice for patients that are hard of hearing.

What actions were taken to address the priority?

A portable loop system was purchased for the Practice which can be moved to any area it is needed. The system is in reception and help patients within the waiting room hear better.

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

The loop system is prominently placed on reception and the yellow "loop" stickers have been placed round the reception area and waiting room.

Patients have fed back that they find it easier to hear what is going on and like the fact that if they struggle to hear in the consultation rooms, then the system is portable and can be moved to the room they're in.

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):

One issue raised in the previous year was the stress put on the telephone system and receptionists. A push was made to encourage patients to use the online booking system for appointments and repeat prescriptions. Information regarding online access was put in the waiting room and on the website. In April 14 the previous Practice Manager informed the PRG that uptake of this system was 650 patients, approximately 10% of the practice population which exceeded local targets. As of March 15 this figure is now 966 patients which is 15% of the practice population.

PPG Sign Off

Report signed off by PPG: *YES*

Date of sign off: *26.3.2015*

How has the practice engaged with the PPG *The practice has been fully involved with the PPG group*

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

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

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? *Until the access issues fully resolved it would be hard to ensure full involvement.*

Do you have any other comments about the PPG or practice in relation to this area of work? *Hopefully in the future we will be able to make progress in the areas The need to be addressed.*