

# Derbyshire & Nottinghamshire Area Team

## 2014/15 Patient Participation Enhanced Service REPORT

Practice Name: Somercotes Medical Centre

Practice Code: C81027

Signed on behalf of practice: Dr Edward C. Pooley

Date: 26.3.15

Signed on behalf of PPG: Mrs Wendy North

Date: 26.3.15

### 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: 10

Detail the gender mix of practice population and PPG:

%	Male	Female
Practice	50	50
PPG	0	100

Detail of age mix of practice population and PPG:

%	<16	17-24	25-34	35-44	45-54	55-64	65-74	> 75
Practice	20	12	12	13	15	12	10	6
PPG				20	10	10	50	10

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	98	0.1	0	1		0.1		
PPG	100							

%	Asian/Asian British					Black/African/Caribbean/Black British			Other	
	Indian	Pakistani	Bangladeshi	Chinese	Other Asian	African	Caribbean	Other Black	Arab	Any other
Practice		0.3		0.3		0.2				
PPG										

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:

**Our demographics highlight that we are a practice that serves a predominantly white British population. Our PPG reflects this although we have struggled to recruit men to the PPG and have had little success in encouraging patients from non-white ethnic backgrounds. Approaches such as publicising the PPG activities and asking PPG members to attend vaccination/flu clinics to promote awareness have been met with positive encouragement; sadly this has not translated into variation within the PPG demographics. Since the last report, we have encouraged two additional members and the**

**practice group now includes younger members.**

**We have also recently upgraded our call board and are now able to highlight the activities of the PPG via a media system within the waiting room. We anticipate that the use of online media will further increase awareness but are cautious about implementing any online strategy prior to testing to ensure that PPG members and patients who sign up to any social media presence of the surgery have adequate protection in place to preserve confidentiality. Our PPG panel are exploring this idea currently.**

**A recent survey within the practice demonstrated that 75% of patients had access to a computer, laptop, ipad or equivalent that could be used to access online services.**

**We have increased our PPG size since last year and our PPG demographic now includes patients from younger age groups.**

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:*

Feedback was gathered through the use of a patient comments and complements book, online and print versions of the friends and family test, the NHS choices website, [www.iwantgreatcare.co.uk](http://www.iwantgreatcare.co.uk), and through the use of a 'question of the month' box where patients could provide quick answers to simple

questions.

*How frequently were these reviewed with the PRG?*

These are reviewed at each meeting.

The feeling from the PPG is that we are a well performing surgery, where each member of staff from reception, admin, and clinical teams provides a high level of holistic care. A frequent description of the practice is that of a 'family-friendly or family-like' approach to medical care. The comments on NHS Choices (most of which are not anonymous) supports our approach to providing healthcare.

### **3. Action plan priority areas and implementation**

#### Priority area 1

*Description of priority area: Upgrading the call board*

Our old patient call board broke and it was discussed with the PPG about replacement.

*What actions were taken to address the priority?*

We researched options for upgrading the call board to provide a better patient experience.

*Result of actions and impact on patients and carers:*

The call board was replaced. The new call board allows 'info-mercials' to be displayed with key public health messages. It also allows us to showcase our patient art gallery, and provides a focal point for the waiting room. It has also been a talking point within the surgery and as encouraged socialisation between patients whilst waiting for their appointment.

*How were these actions publicised?*

n/a

## Priority area 2

*Description of priority area:*

Reduction in medication wastage and over-ordering of medications.

*What actions were taken to address the priority?*

We have liaised with local pharmacies to reduce the quantities of medication that are ordered (particularly regarding creams and other topical medications that can be over-ordered or have short expiry dates). Medication reviews are flagged to patients where needed and local pharmacies and carers have been encouraged to feed back where potential medications wastage may occur.

*Result of actions and impact on patients and carers:*

We will audit our progress on this once the new systems have been in place for 6 months. This would give an adequate time frame in which to see change and the measure the impact of the measures we have taken.

*How were these actions publicised?*

Discussion with patients during appointments, highlighting of medication reviews on prescription requests.

### Priority area 3

*Description of priority area:*

Improving access to the surgery.

One issue that has been flagged since the inception of the PPG is the access to appointments within working hours. Data from the GP patient survey and our own patient surveys shows that whilst patients are happy with our opening hours, there is an increasing need to obtain medical advice during working hours for non-urgent problems or where patients struggle to attend surgery.

*What actions were taken to address the priority?*

We have taken two approaches to tackle this issue. 1. The use of video-based consultations, and 2. Development of a system to allow online/email-based consultations.

*Result of actions and impact on patients and carers:*

These have been a priority area and discussed frequently within the PPG and amongst practice staff in order that any new system would benefit patients without reducing the quality of the patient experience for patients who wish to not use online or video consultations. After discussion, it was felt that these were useful options to explore.

One barrier to implementation has been adjusting workflow in order that the systems can work effectively and with minimal disruption to the administration and day-to-day running of the practice.

We have started promoting video consultations and are looking to roll-out a system for email consultations over the next month.

*How were these actions publicised?*

Video consultations have been publicised by notices within the surgery, within consultations, and by email to those patients registered with the online booking system. Notification of the email consultation system will be sent to patients who have online-access as it was felt that this group of patients is most likely to feel comfortable using an email/online consultation system.

### **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):

Within the last PPG report, several areas were highlighted as potential avenues to increase the ease with which patients could access healthcare. We have heavily promoted the use of online access as a method of patients have extra control over when patients can book appointments and how they can book appointments. Currently we offer the option for face-to-face appointments, telephone appointments, and video-call consultations. All of our face-to-face appointments with doctors are bookable in person, via telephone or using the online booking system.

The online booking system has reduced our DNA rate (as has the use of text message reminders) and we have almost 500 patients who are signed up to the system (out of 7180 total). Where patients have registered an online account, 218 patients have booked an appointment online using the system. The majority of patients use the system to request repeat prescriptions. The combination of online booking and prescription requesting has freed up reception time to deal with patients via telephone or face to face if this is the patient's preferred method of interaction. We are one of the few practices locally that allows online booking for all doctor appointment slots.

The development of a virtual PPG is pending. The main issue behind this is caution in balancing information access with confidentiality when using social media platforms such as Twitter and Facebook and having enough staff members who can use these tools to their full advantage and activity promote uptake. Without having a dedicated member of staff it is possible that these media channels will not enhance the patient experience but may instead detract from it.

The practice website has been updated regularly to keep content fresh and encourage patients to gain information via this route.

We have met our targets proposed in the previous years' report.

#### 4. PPG Sign Off

Report signed off by PPG: YES

Date of sign off: 26.3.15

How has the practice engaged with the PPG:

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

*We have used posters within the practice, put the PPG information in our practice leaflet, signposted the work of the PPG online, and provide multi-language information to new patients where appropriate. One approach that we take in the practice is to ask patients how their name is pronounced phonetically: this promotes rapport, trust, and allows all members of staff to build a relationship with patients where language difficulties may be present.*

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

*Yes. We have gained feedback via online, face-to-face, and survey methods. The PPG has been proactive in defining new ways of seeking face to face feedback (i.e. informally through volunteering at vaccination clinics) and we are increasing our use of 'quick survey' methods where patients can put a token in a box to indicate answers to simple, yes/no-type questions. These questions change monthly and allow us to provide an easy, fun method of feedback collection.*

*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?*

*Increased use of online booking to improve access to health.  
Improved signposting of information within the practice*

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

No

**Please submit completed report to the Area Team via email no later than 31 March 2015 to:**

- Derbyshire practices: [e.derbyshirenotttinghamshire-gpderbys@nhs.net](mailto:e.derbyshirenotttinghamshire-gpderbys@nhs.net)
- Nottinghamshire practices: [e.derbyshirenotttinghamshire-gpnotts@nhs.net](mailto:e.derbyshirenotttinghamshire-gpnotts@nhs.net)