

# Annex D: Standard Reporting Template

North Yorkshire and Humber Area Team  
2014/15 Patient Participation Enhanced Service – Reporting Template

Practice Name: Hackness Road Surgery

Practice Code: B82106

Signed on behalf of practice: Dr Phil Jones

Date: 11/03/2015

Signed on behalf of PPG: Mr TL Kirkup - Chair

Date: 27/03/2015

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 - Face to Face Meetings with PRG Members Quarterly & via email with Virtual PRG periodically as required. |      |        |          |       |   |       |       |       |       |      |     |
| Number of members of PPG: PRG Meetings Group 14, Virtual PRG 13   |      |        |          |       |   |       |       |       |       |      |     |
| Detail the gender mix of practice population and PPG:   |      |        |          |       | Detail of age mix of practice population and PPG: |       |       |       |       |      |     |
| %   | Male | Female |          |       |   |       |       |       |       |      |     |
| Practice  | 1567 | 1755   | <16      | 17-24 | 25-34   | 35-44 | 45-54 | 55-64 | 65-74 | > 75 |     |
| PRG   | 9    | 18     | Practice | 522   | 246   | 290   | 339   | 444   | 503   | 513  | 465 |
|   |      |        | PRG      | 0     | 1   | 1     | 1     | 2     | 7     | 12   | 3   |

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 | 2752    | 10    | 0                        | 58          | 2                             | 7                    | 6            | 4           |
| PRG      | 14      |       |                          |             |                               |                      |              |             |

|          | Asian/Asian British |           |             |         |             | Black/African/Caribbean/Black British |           |             | Other |           |
|----------|---------------------|-----------|-------------|---------|-------------|---------------------------------------|-----------|-------------|-------|-----------|
|          | Indian              | Pakistani | Bangladeshi | Chinese | Other Asian | African                               | Caribbean | Other Black | Arab  | Any other |
| Practice | 17                  | 18        |             | 1       | 9           | 5                                     | 0         | 2           | 1     | 430       |
| 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:

A poster and leaflets are displayed in the waiting room and these are also promoted on our website. All staff are encouraged to promote the PRG face to face when an opportunity arises.

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:**

Scarborough & Rydale Clinical Commissioning Group Information Request Patient Survey

Friends and Family Feedback

Patient Relations Survey

Significant Events

Walk for Health

Hackness Yarners Crafting Group

Fundraising Activities

Practice Newsletters

**How frequently were these reviewed with the PRG?**

Feedback was discussed at each quarterly meeting.

## 3. Action plan priority areas and implementation

### Priority area 1

**Description of priority area:**

Promote Online access

**What actions were taken to address the priority?** Online Access is promoted with leaflets in the waiting room, verbally with patients attending at reception where appropriate, on the website, in the new patient pack for all newly registering patients, on repeat prescription forms and opportunistically during any patient contact time where appropriate.

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

423 patients are now registered for online access. This has helped to relieve pressure on the telephone lines and these patients enjoy a wider range of services from their own mobile phone or tablet. Patients and/or Carers with online access can make

appointments, request repeat prescriptions, have access to their Summary Care Record, change their contact details and view future and past appointments. Service was publicised on the practice website, on repeat prescriptions, in the Patient Information Leaflet, leaflets in the waiting room, in practice Newsletters and in New Patient Packs.

## Priority area 2

### **Description of priority area:**

Consider the timing of patient reviews and recalls for chronic disease management.

### **What actions were taken to address the priority?**

Progress is being made to bring reviews into line so patients can attend and have reviews done in one visit where possible. This has been in progress throughout the year and is ongoing.

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

Where it has been implemented it has had the effect of reducing the number of visits required for patients to ensure that all their reviews are completed in a timely manner and reduced the administration time required to contact patients to arrange appointments. This has been done more discreetly with the individual patients as required.

## Priority area 3

### **Description of priority area:** Extend the appointments from 4 weeks in advance to 6 weeks.

Patients had requested a longer lead time when booking appointments into the future to assist their time management capabilities.

### **What actions were taken to address the priority?**

This was discussed at the Practice meeting with the Partners and Management and it was agreed to extend the notice for holiday requests for clinicians to 6 weeks to allow the future appointment clinics to be created 6 weeks forward. This was implemented in May 2014.

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

More convenient for patients who want to book further ahead for reviews etc, Information added to the Patient Information Leaflet and in the waiting room.

**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):**

In previous years the telephone system was highlighted for improvement to provide additional numbers and improved access to the practice. The new telephone system installed in 2013/2014 has helped deliver improvements to service and filter calls to correct departments. Also increasing the staffing hours at reception has been beneficial. The ongoing promotion of online services has also helped to relieve pressure on the telephone lines as a growing number of patients order repeat medication and book appointments online.

Signage has also been a previous area for improvement and whilst the signs were changed they were gold lettering on dark blue and, on reflection, thought to be rather dark and difficult to read particularly in the winter months. The practice is currently replacing the signage at both sites with a new livery, this has been designed with bright blue lettering on a white background giving greater visibility and to communicate more clearly that we are a GP surgery.

The practice did look into the possibility offering our dispensing patients a delivery service but due to the number of patients we dispense to and the costs involved this was not successfully implemented.

In 2013/14 it was suggested to TPP that the online access could provide information on date and time of any future reviews as a reminder for patients. The request was submitted to TPP on 26 November 2014 and we await feedback.

Support the PRG in promoting good health and community spirit. The first Walk to Improve Health was staged on 13 July 2014 and was enjoyable for those that were able to take part, another walk is planned for Spring 2015 with lunch at the Blacksmith's Arms at the end of the walk. We held a Saturday Craft Club for the Charity Yarn Bombing on August Bank Holiday 2014, due to popular demand this event will be repeated in Summer 2015.

#### 4. PPG Sign Off

Report signed off by PPG: YES

Date of sign off: 27/03/2015

**How has the practice engaged with the PPG:**

Quarterly Meetings held at the practice, attended by Management, staff and clinicians.

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

One member is a representative of a local Diabetes UK group, another member worked in the Mental Health sector. The Chair is from an educational background and prior to retirement in June 2014 was teaching children who had been placed outside mainstream education. He has recently become a Dementia Champion and will be promoting awareness.

**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, all areas discussed at the PRG meetings.

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

Online access has provided easier access to repeat prescriptions and appointments. Improved management of chronic diseases has reduced attendances required. Ability to book 6 weeks in advance has enabled improved time management for patients.

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

The PRG is committed to finding new and different ways of engaging with patients and the local community.