

# Annex D: Standard Reporting Template

Cheshire, Warrington & Wirral Area Team  
 2014/15 Patient Participation Enhanced Service – Reporting Template

Practice Name: Penketh Health Centre

Practice Code: N81020

Signed on behalf of practice (type name): Adina Cadman

Date: 31/3/2015

Signed on behalf of PRG (type name): Ella Finnegan

Date: 31/3/2015

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

Does the Practice have a PRG? <b>YES</b>																																					
Method of engagement with PRG: Face to face, Email, Other (please specify) Face to face and email																																					
Number of members of PRG: 7																																					
Detail the gender mix of practice population and PRG: <table border="1" style="margin-left: 20px; border-collapse: collapse; width: 80%;"> <thead> <tr> <th style="width: 15%;">%</th> <th style="width: 30%;">Male</th> <th style="width: 30%;">Female</th> </tr> </thead> <tbody> <tr> <td>Practice</td> <td>48.5%</td> <td>51.5%</td> </tr> <tr> <td>PRG</td> <td>57.2%</td> <td>42.8%</td> </tr> </tbody> </table>	%	Male	Female	Practice	48.5%	51.5%	PRG	57.2%	42.8%	Detail of age mix of practice population and PRG: <table border="1" style="margin-left: 20px; border-collapse: collapse; width: 100%;"> <thead> <tr> <th style="width: 10%;">%</th> <th style="width: 10%;">&lt;16</th> <th style="width: 10%;">17-24</th> <th style="width: 10%;">25-34</th> <th style="width: 10%;">35-44</th> <th style="width: 10%;">45-54</th> <th style="width: 10%;">55-64</th> <th style="width: 10%;">65-74</th> <th style="width: 10%;">&gt; 75</th> </tr> </thead> <tbody> <tr> <td>Practice</td> <td>17.0%</td> <td>8.1%</td> <td>9.4%</td> <td>12.8%</td> <td>15.4%</td> <td>10.9%</td> <td>14.5%</td> <td>11.7%</td> </tr> <tr> <td>PRG</td> <td>0%</td> <td>0%</td> <td>0%</td> <td>14.3%</td> <td>28.6%</td> <td>28.6%</td> <td>0%</td> <td>28.6%</td> </tr> </tbody> </table>	%	<16	17-24	25-34	35-44	45-54	55-64	65-74	> 75	Practice	17.0%	8.1%	9.4%	12.8%	15.4%	10.9%	14.5%	11.7%	PRG	0%	0%	0%	14.3%	28.6%	28.6%	0%	28.6%
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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								
PRG								

	Asian/Asian British					Black/African/Caribbean/Black British			Other	
	Indian	Pakistani	Bangladeshi	Chinese	Other Asian	African	Caribbean	Other Black	Arab	Any other
Practice										
PRG										

Describe steps taken to ensure that the PRG is representative of the practice population in terms of gender, age and ethnic background and other members of the practice population:

The practice has a large elderly population and this is represented well within the group. The practice has found it difficult to recruit patients with young children or members from different ethnic backgrounds, despite advertising and encouraging patients to join the group.

The practice promotes the patient group on the website and within the practice, patients passing comments to staff or managers are invited to join the PRG. Additionally letters sent to patients who have complained contain details on how they could join the group and be part of the decision process.

Are there any specific characteristics of your practice population which means that other groups should be included in the PRG? e.g. a large student population, significant number of jobseekers, large numbers of nursing homes, or a LGBT community? YES/NO

**Yes**

If you have answered yes, please outline measures taken to include those specific groups and whether those measures were successful:

As mentioned previously the practice has an aging population and this group is represented within the group.

The practice also has a large number of nursing home patients. One of the care home managers agreed to join the group to represent this cohort of patients but unfortunately she has been on long term sick and unable to attend and we have been unsuccessful in recruiting other members of that group to attend the PRG. However, one of the current members of the PRG is a named carer for one of our patients and is able to put their perspective forward.

## 2. Review of patient feedback

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

The PRG suggested having a comments box in the surgery, this is emptied by the them and the comments collated. The practice then responds to the comments and places this information in a poster format (on a monthly basis) on the PRG board.

The PRG have a dedicated PRG NHS.net email account which is managed by members of the PRG which they are to use to facilitate discussions regarding patients' issues/comments.

Comments made on the Friends and Family forms are also discussed at PRG meetings.

In addition individual members bring comments to PRG meetings made personally to them by our patients.

One of the PRG recently received comments from another patient, regarding the services the practice provides, whilst they were waiting to be dealt with at reception.

How frequently were these reviewed with the PRG?

Meetings of the PRG have been increased to monthly as it was felt that it was important to maintain momentum. Comments are discussed at each of these meetings.

### 3. Action plan priority areas and implementation

#### Priority area 1

##### Description of priority area:

Appointments system, this is still an issue for patients and the majority of the comments received by the PRG were concerning patients not being able to book a GP appointment far enough in advance.

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

Discussions held with the PRG regarding this problem.  
Discussions with GP and staff on how we could address the issue.  
Review of the comments and complaints made relating to our services.  
Agreed that in order to address this matter a number of appointments should be bookable a fortnight ahead.

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

The practice has changed the appointments system in order to offer patients the ability to book a selection of appointments up to 14 days in advance. This is an increase on the current 48 hour period.

This change has been advertised on the practice website and on posters within surgery.

## Priority area 2

### Description of priority area:

Investigate the use of Dr First as a tool to improve access for patients to GP services.

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

The practice received funding from the CCG to conduct the initial capacity and demand assessment.  
The Capacity and Demand exercise was performed over the month of September with the support from the PRG  
A report was produced which showed the volume of appointments requested and compared this against the capacity of GP appointments.

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

The capacity and demand showed that capacity and demand were well matched.  
However, following further discussion between the PRG and the practice it was agreed that Dr First would not benefit patients, as it requires patients to ring the practice, leave their details and wait for a GP to then call them back, it was considered to be detrimental to working patients / those with young families as they wouldn't be able to organise their day.

### Priority area 3

#### Description of priority area:

Improving the waiting area. This was due to comments from patients that the waiting area was dull and depressing.

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

Discussed the need to decorate waiting area to make it more welcoming.

In the meantime the opportunity to access monies for practice improvements was offered by NHS England.

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

The practice secured the funding and new flooring was fitted in the waiting area. A selection of new wipe down seating was also purchased. These improvements not only improved the appearance of the waiting area but also reduced the risk of infection for patients.

In addition funding was also secured to improve disabled access via automatic opening for the waiting room doors.

Plans are in place to decorate the waiting area by the end of June 2015 at the latest.

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):

- **Patients were encouraged to contact the practice after 10.30 when not requiring a GP appointment.**

The practice has seen a reduction in the number of these calls this has allowed patients requiring a GP to get through on the telephone.

- **Patients wished to pre book appointments**

This is now in place

- **Investigate Dr First as a potential solution to the access issue**

Consideration of the capacity and demand report findings and discussions with the PRG and review of patients comments confirmed that Dr First was not the best solution for the practice



#### 4. PRG Sign Off

Report signed off by PRG: YES

Date of sign off: 31/03/2015

How has the practice engaged with the PRG:

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

Advertising in waiting room, promoted group, through website. All members of the group have advised friends and family of services and implementation of the services.

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

Yes, the practice used a variety of sources, surveys, comments box, NHS choices and PRG involvement.

Was the PRG involved in the agreement of priority areas and the resulting action plan?

Yes with surveys – Dr First and the appointment system

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

Listened to patients resulting in a more welcoming waiting room, flexibility with appointments system, also listened to patients re concerns about Dr First.

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

The PRG have developed relationships between the GP's and the practice for the benefit of patients. This is on going as although we have made progress with our PRG we hope to continue to make further progress with them.