

Annex D: Standard Reporting Template

Taken from; GMS Contract 2014/15, Guidance and Audit requirements, NHS England Gateway reference: 01347

East Anglia Area Team 2014/15 Patient Participation Enhanced Service Reporting Template

Practice Name: Milton Surgery

Practice Code: D81612

Signed on behalf of practice: P. Vincett Date: 20.3.201

Signed on behalf of PPG/PRG: Date: 23/3/2015

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

Does the Practice have a PPG? YES / NO	Yes
Method of engagement with PPG: Face to face, Email, Other (please specify)	Face To Face
Number of members of PPG:	14

Detail the gender mix of practice population and PPG:

%	Male	Female
Practice		1
PPG	5	8

Detail of age mix of practice population and PPG: unknown

%	<1 6	17- 24	25- 34	35- 44	45- 54	55- 64	65- 74	>7 5
Practice						1		
PPG								

Detail the ethnic background of your practice population and PPG: unknown

	White				Mixed/ multiple ethnic groups			
	British	Irish	Gypsy or Irish traveller	Other White	White & Black Caribbea	White & Black African	White & Asian	Other mixed
Practice	1							
PPG								

		Asian Briti	ish	Black/African/Caribbean/Bl ack British			Other			
	Indian	Pakista ni	Banglade shi	Chines e	Other Asian	African	Caribbe an	Other Black	Arab	Any
Practic										
e										
PPG					<u></u>					

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:

We continue to try and recruit new members of the PPG. We advertise this via the surgery, surgery website and local paper. Also we have a question specifically about the PPG in our practice questionnaire, with 150 patients taking part in the audit.

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 (Lesbian Gay Bisexual Transgender) community?

No

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

2. Pavious of nations for alloyer
2. Review of patient feedback
Outline the sources of feedback that were reviewed during the year:
the year.
We look at complaints – given to the Practice or to the PPG.
This year it was specifically around the appointment system. The system was altered after
discussion with the PPG. An audit was taken by the PPG of patients using the service after
about a month of starting the new system and then it was repeated again three months later.
After looking at the audit it was decided a slight alteration was needed to the system and is to
be implemented after April 2015. We will then do another audit to see how the system is
working for patients.
How frequently were these reviewed with the PPG?
The PPG meets every four to six weeks. Events and feedback are reviewed at the meetings.

3. Action plan priority areas and implementation

Priority area 1 Description of priority area: Appointment system, ,

What actions were taken to address the priority?
Appointment system – Discussed, altered, audited and then discussed again with relevant alterations made.
Result of actions and impact on patients and carers (including how publicised):
We advertised changes by leaflet, poster, website and by talking directly to people At present the appointment system is in the final stages but has proved to be an improvement to most patients.
Priority area 2
Description of priority area: buddy system for patients with chronic disease
What actions were taken to address the priority? Buddy system for chronic disease patients (specifically diabetics). To try and get a buddy system working but there were problems with trying to implement this. It was thought at first that this could be an unmonitored system, using volunteer patients to help those with a new diagnosis, without cost, but after looking into it further it felt that there would need to be monitoring of the scheme and patients involved, and this would come at a cost that was not available. After much discussion within the group an idea of putting a booklet together giving real life help from anonymous patients in the area was suggested. At the moment a poster is being designed to try and encourage people to give their experiences and how they coped anonymously.

Result of actions and impact on patients and carers (including how publicised): We have only just started the work to get a booklet put together to help patients with chronic disease but hope this will be helpful to our patients. A poster is in design at the moment.
Priority area 3
Description of priority area: Milton Community Cafe for mixed ages at community centre – promoting wellbeing and help within the community. To try and get a community navigator to attend in the future.
What actions were taken to address the priority?
Milton Community Café for mixed ages at the community centre – This is up and running and proving a huge success every month with approximately 15 – 20 attendees of mainly elderly but with a smattering of other age groups. The group meet for a drink, cake etc and can meet other people. People can play games and chat. We hope to recruit volunteers and work closely with the navigator system. We have been advertising for a navigator within the area but without success so hope that we may be able to encourage volunteers at the community café, encouraging help and advice within the community.
Result of actions and impact on patients and carers (including how publicised):

The community café has been going for nearly 10 months and is beginning to be helpful and popular with the patients. This is advertised in the practice and around the surrounding area. The Surgery has a new website and will be promoting the Community Café and its work.

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):

We wanted to get a community navigator within Milton and the surrounding practice area. This has not been possible, but with the Community club it was felt this may be another alternative to introduce the idea. Rather than have one person to have a community of helpers and volunteers. We hope that the changes made to the appointment system will be the answer to the complaints and dissatisfaction of patients in the previous year

4. PPG Sign Off

Report signed off by PPG: Yes

Date of sign off:

All (3 Betson)

How has the practice engaged with the PPG:

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

The practice continues to encourage patients to join the group by word of mouth or by advertisement.

Has the practice received patient and carer feedback from a variety of sources? The practice receives feedback from the annual questionnaire given to patients and very often receives feedback verbally or via the surgery email and is now participating with the friends and family programme.

Was the PPG involved in the agreement of priority areas and the resulting action plan? The PPG has chosen the above areas to pursue after discussion within the group.

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

The first two audits taken after the change of appointment system have shown improvement for patients.

Do you have any other comments about the PPG or practice in relation to this area of work? The PPG have worked hard to get the Community Café up and running and are being rewarded with an increasing turnout.