

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

Practice Name: The Ridge Medical Practice

Practice Code: B83055

Signed on behalf of practice: Nick Nurden

Date: 24<sup>th</sup> March 2015

Signed on behalf of PPG: XXXXXXXX

Date: 24<sup>th</sup> March 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,																																					
Number of members of PPG: 22																																					
Detail the gender mix of practice population and PPG: <table border="1" style="margin-left: 20px; width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 20%;">%</th> <th style="width: 30%;">Male</th> <th style="width: 30%;">Female</th> </tr> </thead> <tbody> <tr> <td>Practice</td> <td style="text-align: center;">49</td> <td style="text-align: center;">51</td> </tr> <tr> <td>PRG</td> <td style="text-align: center;">41</td> <td style="text-align: center;">59</td> </tr> </tbody> </table>	%	Male	Female	Practice	49	51	PRG	41	59	Detail of age mix of practice population and PPG: <table border="1" style="margin-left: 20px; width: 100%; border-collapse: collapse;"> <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 style="text-align: center;">28</td> <td style="text-align: center;">11</td> <td style="text-align: center;">16</td> <td style="text-align: center;">13</td> <td style="text-align: center;">12</td> <td style="text-align: center;">9</td> <td style="text-align: center;">5</td> <td style="text-align: center;">6</td> </tr> <tr> <td>PRG</td> <td style="text-align: center;">0</td> <td style="text-align: center;">0</td> <td style="text-align: center;">0</td> <td style="text-align: center;">0</td> <td style="text-align: center;">36</td> <td style="text-align: center;">9</td> <td style="text-align: center;">41</td> <td style="text-align: center;">14</td> </tr> </tbody> </table>	%	<16	17-24	25-34	35-44	45-54	55-64	65-74	> 75	Practice	28	11	16	13	12	9	5	6	PRG	0	0	0	0	36	9	41	14
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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	10000	61		1096	180	63	215	146
PRG	16				2		4	

	Asian/Asian British					Black/African/Caribbean/Black British			Other	
	Indian	Pakistani	Bangladeshi	Chinese	Other Asian	African	Caribbean	Other Black	Arab	Any other
Practice	903	5733	59	60	77	268	173	21		62
PRG	2	2					2			

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:

- Invite to join the PPG is on the patient display screen in reception
- Other Patients targeted to join to try and ensure better representation
- PPG has notice board in reception to highlight their existence
- Patients invited to join by staff members, and often following a complaint

Where specific groups are under-represented we have made specific arrangements to seek the views of these groups. The main areas where we struggle have been young people, working age people and Eastern European. We have therefore engaged with these groups outside the main PPG (via the teen drop in clinic and by attendance at a weekly Slovakian parents club at the local primary school) to seek their views and bring them into the main PPG discussions. Also our patient services manger attends the following groups to gather feedback about local health issues – Great Horton Community Partnership, Great Horton Live at Home scheme, Wibsey Urban Village, Carer’s resource, Bradford Community Environment Project, St Oswald’s Primary School, Disability Strategic Partnership, Bradford People First, Sandal Community Centre, Buttershaw and Woodside Partnership, The Joshua Project and Buttershaw High School.

During this year we have also seen a transition in our PPG as we have launched and developed the work of our practice champions who are now becoming very active in the practice with a regular presence in our reception and with a number of groups now up and running. The two groups have now merged to form a single very active group working with the practice and for the community.

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:

PPG/Champions Meetings  
Patient Survey  
Friends and family Test  
Practice champions meeting patients in reception  
Individual feedback from patients

How frequently were these reviewed with the PRG?

Ongoing basis at all meetings – PPG meetings and champions meetings (held monthly)

### 3. Action plan priority areas and implementation

Priority area 1
<p data-bbox="203 464 589 499">Description of priority area:</p> <p data-bbox="203 539 1738 572">Launch and develop the work of the practice champions and embed in the day-to-day working of the practice</p>
<p data-bbox="203 686 889 719">What actions were taken to address the priority?</p> <p data-bbox="203 759 2029 866">Several groups of champions have been trained during the course of the year to try and increase numbers of active champions to 40 or 50, so far we have trained more than this but are left with core group of active champions of around 20 at present. They have now got going with work in a number of areas and are becoming a regular presence in the practice.</p>
<p data-bbox="203 1058 1312 1091">Result of actions and impact on patients and carers (including how publicised):</p> <p data-bbox="203 1131 2040 1275">They are now running regular (weekly) walks in local parks, supporting our FFT survey, running a healthy eating group, managing the weekly knit and natter group, developing a relaxation group and are a regular presence in the waiting area to help and support patients in the surgery. This is helping patients navigate through our systems better and in time will help to impact in inappropriate demand on NHS services. This is publicised by their presence in the waiting area!</p>

## Priority area 2

### Description of priority area:

Champions to support the practice with doing the Friends and Family test to engage with Patients and identify more priorities.

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

The champions are using the FFT survey as a means of engaging with patients and helping us get more feedback from them re our services and is helping us get better volumes of response to this survey. This is also enabling them to tell more patients about the work of the champions and encourage more to get involved.

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

We have got a lot of feedback from patients through this route, in particular with regard to appointment availability and the concern that this still causes patients – a significant barrier to them. The practice is using this to help make improvements and its ongoing work regarding access which is constant ongoing piece of work and involves regular interaction between champions, patients and the practice. FFT results and feedback are published on NHS websites and also in the practice.

### Priority area 3

#### Description of priority area:

Promote better health in our community and other schemes to help manage demand for the practice.

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

The champions have worked with us to launch a number of initiatives including a healthy eating group – promoting this in the practice, walking groups and groups to help address social isolation. The practice is also developing a number of initiatives to better manage long term conditions, prioritise our most needy patients, work with other local practices to combine services and work in a more integrated way across health and social care. The practice has also recently engaged with a local “pharmacy first” scheme to help manage demand.

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

This is helping to create capacity in the system for better access, though progress on this is slow. We are gradually starting to see the ability of patients to be able to take more responsibility for their own care and are able to better signpost them to more appropriate parts of the health service for their care. Many of these schemes are promoted via the practice website and in the practice as well as by the champions being present in the surgery.

## 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):

### **Action Plan Spring 2014 updates**

#### **Continuity of care**

It is agreed that the practice will have a discussion with the clinical team around taking more steps to be able to provide continuity of care as this is the preference of patients and enables clinicians to work more efficiently. This discussion has taken place and significant work has been done this year with the roll out of named GP for 75 and over, the AUA DES and other schemes to prioritise the right care for the right patients.

#### **PPG Development**

The PPG will continue to review the way in which it operates in the practice. In particular to try and make sure a wider cross section of the patients are aware of the group and the work it does. This will be achieved by continuing to develop the presence of the group in the waiting room and to meet with and support patients in this way via this forum. There will also be development of the practice champions group working within the practice and among the community and this will hopefully dramatically improve the level of engagement. Significant progress made with this work and the champions and PPG have now combined into a single group.

#### **Triage**

Whilst it is acknowledged we are not going to be able to solve the issue of appointments the practice will focus on identifying better ways of trying to triage requests for appointments so that the patients we see are the right ones and those most in need. This will be by further engagement in risk profiling, integrated care and up-skilling the reception team to be better able to support this work. This will also form part of ongoing work with regard to access. Work has continued in all these areas with the promotion of EPS, increased of SMS and other electronic links into the practice. Further training has been done with all reception staff in customer service skills.

#### **Parking**

Whilst it is unlikely anything significant can be done to improve the situation (we are where we are) there are ongoing frustrations for patients with the parking situation at Great Horton in particular the inappropriate use of disabled parking spaces. Little progress has been made on this, but we have tried where possible to encourage more responsible parking.

#### 4. PPG Sign Off

Report signed off by PPG: YES

Date of sign off: 10<sup>th</sup> March 2015

**How has the practice engaged with the PPG:** regular close working via the work of the champions with involvement of the business manager and reception staff at monthly meetings, champions feel part of the practice/community team.

**How has the practice made efforts to engage with seldom heard groups in the practice population?** We have met with a variety of community and charity groups who are working with more vulnerable groups of patients including those from deprived areas and those with learning difficulties to make sure their voices are heard The champions group is also more representative of these groups than the original PPG had been

**Has the practice received patient and carer feedback from a variety of sources?** Yes – as described above feedback from surveys, complaints, face to face interaction, emails and via discussion at meetings.

**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?** Early days to see and hard to measure but champions feel that a difference is being made.

**Do you have any other comments about the PPG or practice in relation to this area of work?** No further comments. Champions looking for ward to expanding their role and influence in the practice.