

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

Practice Name: The Spa Surgery

Practice Code: B82027

Signed on behalf of practice: Annette Given, Practice Manager

Date: 26 March 2015

Signed on behalf of PPG: Mrs Alison Hill

Date: 30 March 2015

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

Does the Practice have a PPG? YES / NO																																					
Method of engagement with PPG: Face to face, Email, Other (please specify) Face to Face meetings																																					
Number of members of PPG: 20																																					
Detail the gender mix of practice population and PPG: <table border="1" style="margin-left: 20px; border-collapse: collapse; width: 100%;"> <thead> <tr> <th style="width: 15%;">%</th> <th style="width: 35%;">Male</th> <th style="width: 50%;">Female</th> </tr> </thead> <tbody> <tr> <td>Practice</td> <td>49%</td> <td>51%</td> </tr> <tr> <td>PRG</td> <td>55%</td> <td>45%</td> </tr> </tbody> </table>	%	Male	Female	Practice	49%	51%	PRG	55%	45%	Detail of age mix of practice population and PPG: <table border="1" style="margin-left: 20px; border-collapse: collapse; width: 100%;"> <thead> <tr> <th style="width: 10%;">%</th> <th style="width: 10%;"><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%;">> 75</th> </tr> </thead> <tbody> <tr> <td>Practice</td> <td>17%</td> <td>9%</td> <td>12%</td> <td>13%</td> <td>15%</td> <td>12%</td> <td>11%</td> <td>11%</td> </tr> <tr> <td>PRG</td> <td>0</td> <td>0</td> <td>0</td> <td>0</td> <td>15%</td> <td>5%</td> <td>30%</td> <td>50%</td> </tr> </tbody> </table>	%	<16	17-24	25-34	35-44	45-54	55-64	65-74	> 75	Practice	17%	9%	12%	13%	15%	12%	11%	11%	PRG	0	0	0	0	15%	5%	30%	50%
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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	40.42%	0.29%	0	3.64%	0.06%	0.13%	0.15%	0.36%
PRG	100%	0	0	0	0	0	0	0

	Asian/Asian British					Black/African/Caribbean/Black British			Other	
	Indian	Pakistani	Bangladeshi	Chinese	Other Asian	African	Caribbean	Other Black	Arab	Any other
Practice	0.33%	0.06%	0.01%	0.83%	0.31%	0.38%	0.06%	0.04%	0	0.7%
PRG	0	0	0	0	0	0	0	0	0	0

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 have an invitation in our regular newsletter, LCD screens, noticeboards and website. Clinicians encourage patients to join to the group whenever appropriate. We have invited younger patients to come to meetings to have their input but without success. This is mainly due to work and family commitments.

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? YES/NO

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

We are school doctors for two private colleges in Harrogate. The doctors have assisted in teaching sessions with students on health promotion, sexual health, bullying, eating disorders etc. We have found this type of interaction very useful in learning how to engage better with this group of patients. For example, we have ensured that students have a choice of seeing a male or female doctor.

2. Review of patient feedback

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

*Action Plan of 2013 – 2014 Patient Survey
Patient consultation regarding proposed merger with neighbouring practice
Patient survey on Proactive Care Plans
Friends & Family Test
General patient comments from Suggestions Box*

How frequently were these reviewed with the PRG?

We hold two meetings a year (usually in October / February). This year we also had an Open Day on 7 February 2015

3. Action plan priority areas and implementation

Priority area 1
<p>Description of priority area:</p> <p>Proposal to merge with neighbouring Practice</p>
<p>What actions were taken to address the priority?</p> <p><i>Patient consultation which ran from October 2014 – March 2015</i></p> <p><i>Our aim was to ensure that we would:</i></p> <ul style="list-style-type: none"><i>• Raise awareness.</i><i>• Give information.</i><i>• Opportunity to comment and feedback.</i><i>• Give information about how to register with alternative practice if plans go ahead.</i><i>• Feedback on results of engagement and decision-making process</i>
<p>Result of actions and impact on patients and carers (including how publicised):</p> <p><i>Proposal was presented to members of the Spa Surgery & St Luke's Surgery's Patient Groups at the Autumn 2014 meetings. All members were supportive of the merger.</i></p> <p><i>Discussed whether any requirement to write to ALL patients of both surgeries. NHS England had agreed there were no hard and fast rules or guidance and as there was no intention to close a branch, move, change staff or even change telephone number etc, It was agreed that this would not be an efficient use of resources. We agreed with the PRG that we would therefore lengthen the period of consultation and use every opportunity to highlight the plan to merge via newsletter, website, noticeboard, LCD screens.</i></p>

Newsletters would be included with all routine re-call letters posted to any patient aged 16 years and over.

To date, over 1,000 copies of our newsletter outlining the proposal to merger and including a Q&A guide have been circulated. This includes details of how to raise questions, concerns and comments.

The newsletter and information on how to comment is also displayed on both Practice websites which can also be accessed via NHS Choices website.

An Open Day was held on Saturday 7th February which gave patients the opportunity to come and meet doctors and staff from both practices to discuss their roles and to find out more about the merger.

Overall we had responses from 30 patients; all except one of these were supportive of the merger. (This patient had moved from a large practice to St Luke's as he particularly wanted to be registered with a small practice so was disappointed to hear of the merger, he was advised of other local practices but has chosen to remain with the newly merged practice).

Results were discussed with the Patient Group at our meeting on 9 March 2015. All members were in favour of the merger.

As soon as we have final agreement from NHS England and Scrutiny Committee, we will write to all households of St Luke's patients to inform them of the name change to Spa Surgery and to assure them that services will continue from Mowbray Square as usual.

Priority area 2

Description of priority area:

Development of Proactive Care Planning

We have taken part in the DES for Proactive Care Planning and this work was extended to 4% of patients as part of the contract between HaRD CCG & Yorkshire Health Network – we wanted to ensure that our patients were engaged with this process and sought their views on the quality of service through a patient survey

What actions were taken to address the priority?

Survey was sent to 100% of patients who had received a Care Plan (330 patients)

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

The following table shows results of the patient survey. This was presented to our PRG at 9th March meeting. There was a very good rate of positive responses to the work that was done. The results showed that there was an average of 16% of patients who 'neither agreed nor disagreed' which indicated to us that some patients and/or carers were not clear about this new service. Clinicians found completing the care plans within a relatively short period of time was challenging especially as it took place over the busy winter months. As care plans are reviewed and the system becomes established and more familiar to patients and staff, we will endeavour to ensure that patients and carers have more understanding about what care planning is all about.

PROACTIVE CARE PLAN SURVEY RESULTS MARCH 2015

B82027 The Spa Surgery Responses		154	
My GP has provided me with a written Care Plan:	Yes	111	
	No	16	
	Don't Know	27	
	Positive	72%	
Q1.I had the opportunity to discuss what was most important for me in decisions about my care or treatment	Strongly disagree	1	1%
	Disagree	7	5%
	Neither agree nor disagree	24	16%
	Agree	84	56%
	Strongly agree	33	22%
	Total	149	
	Positive	79%	
Q2.I was involved as much as I wanted to be in decisions about my care or treatment	Strongly disagree	1	1%
	Disagree	10	7%
	Neither agree nor disagree	19	13%
	Agree	85	58%
	Strongly agree	32	22%
	Total	147	
	Positive	80%	
Q3. I was given sufficient information to help me to manage my health	Strongly disagree	2	1%
	Disagree	11	7%
	Neither agree nor disagree	26	18%
	Agree	83	56%
	Strongly agree	26	18%
	Total	148	
	Positive	74%	
Q4. I have had enough support from my health and social care team to help me to manage my health	Strongly disagree	3	2%
	Disagree	12	8%
	Neither agree nor disagree	24	16%

	Agree	79	54%
	Strongly agree	28	19%
	Total	146	
	Positive	73%	
Q5. The support and care I receive is joined-up and working for me	Strongly disagree	4	3%
	Disagree	7	5%
	Neither agree nor disagree	29	20%
	Agree	77	52%
	Strongly agree	30	20%
	Total	147	
	Positive	73%	
Q6. I am confident that I can manage my own health	Strongly disagree	21	14%
	Disagree	17	11%
	Neither agree nor disagree	30	20%
	Agree	66	44%
	Strongly agree	16	11%
	Total	150	
	Positive	55%	

Priority area 3

Description of priority area:

Introduction of Friends & Family Test

What actions were taken to address the priority?

We discussed introduction of FFT with the Patient Group at our meeting in October. It was agreed that a useful second question would be: Can you tell us why you gave that response? We also agreed that we would clearly display the opportunity to complete FFT on the LCD screens (cartoon); noticeboards, reception desks, website. Staff would also verbally advise patients of FFT.

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

FFT introduced on 1 December – all positive responses to date.

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):

UPDATE ON ACTION PLAN – 2013 - 2014

- **Satisfaction with the Duty Doctor System**

There was a high satisfaction rate with the Duty Doctor system and it was agreed that this should continue in its present form. Some concerns regarding the waiting time for a routine appointment. Agreed that the doctors will increase the number of patients per surgery from 14 to 15 patients and the locum cover will be reviewed in the light of Dr Foley reducing his sessions after April. A recruitment campaign is to commence soon to replace Dr Foley who will leave us in September 2014 and Dr Emms who is to retire in December 2014.

UPDATE: APPOINTMENTS INCREASED, TWO NEW DOCTORS IN POST FROM AUGUST 2014 WHICH GAVE A CROSS OVER PERIOD BEFORE DR EMMS LEFT

A concerted effort to be made to raise awareness of the number of people who do not attend for their appointments, this will include researching the possibility of allowing patients to text cancellation of appointments.

UPDATE: WE HAVE HIGHLIGHTED THE DNA RATE ON LCD SCREENS BUT WE ARE STILL REVIEWING THE POSSIBILITY OF CANCELLING BY TEXT AS USE OF TEXTING NATIONALLY UNDER REVIEW

- **Impact of newly qualified doctors and undergraduate students training in the practice**

The positive response to teaching in the practice was very encouraging. The practice will continue to strive to keep patients aware of the teaching and training. All patients will be informed when booking appointments that they may be seen by a doctor in training or a medical student and they will always have the opportunity to decline. **UPDATE – THIS HAS BEEN ACTIONED AND WE WILL SURVEY PATIENTS ON THIS AGAIN FOLLOWING MERGER**

- **Satisfaction with the Practice Nurse service**

The very high level of satisfaction with the service provided by the nurses was well received by everyone at the practice. We are currently reviewing how our nurses work and whether there is an opportunity for extending the shared phlebotomy service to other shared treatment room services (eg ear syringing; minor dressings; minor injuries etc). A feasibility study has been commissioned by the four practices who work from MSMC and the results of this will be shared with the patient group.

FEASIBILITY STUDY WAS COMPLETED BUT NO FURTHER ACTION TAKEN IN VIEW OF PROPOSED MERGER

- **Notifying Patients of the Results of Survey and Action Plan**

The Patient Group were supportive of continuing to have regular newsletters and to use other methods such as the LCD screens, Notice boards and Website to keep patients informed of the results of the survey and any other changes to staff or services.

We will continue to inform patients of our opening times (including extended opening times) via the Newsletters, LCD screens, Notice boards and Website

4. PPG Sign Off

Report signed off by PPG: YES
Date of sign off: 30 March 2015 (Mrs Alison Hill)

How has the practice engaged with the PPG: - *E-mail; letters; hard copy newsletter at reception desk; website; meetings*

How has the practice made efforts to engage with seldom heard groups in the practice population? *Clinicians made personal invitations and invited representatives of Harrogate Homeless Project to talk to staff about their work*

Has the practice received patient and carer feedback from a variety of sources? *Yes – surveys, Friends & Family Test*

Was the PPG involved in the agreement of priority areas and the resulting action plan? *Yes, through discussion at meetings*

How has the service offered to patients and carers improved as a result of the implementation of the action plan? *Extended surgery times, more appointments etc.*

Do you have any other comments about the PPG or practice in relation to this area of work? *I feel that the surgery does try to engage all members in its work. However I think unless something is wrong, most people are happy to continue as they are, therefore the surgery must be getting it more right than wrong!*