# Annex D: Standard Reporting Template

# Birmingham/Black Country/Solihull Area Team 2014/15 Patient Participation Enhanced Service – Reporting Template

Practice Name: Dorridge Surgery (Dr Upton & Partners)

Practice Code: M89010

Signed on behalf of practice: Amanda Shakespeare (Practice Manager)

Date: 30/3/2015

Signed on behalf of PPG: Ian Black (vice chair, in the absence of the chairperson who has been in hospital since the beginning Mar

Date: 30/3/2015

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 (please specify): Face to face, e-mail, monthly meetings, one to one telecoms

Number of members of PPG:10

Detail the gender mix of practice population and PPG:

| %        | Male | Female |
|----------|------|--------|
| Practice | 49   | 51     |
| PPG      | 40   | 60     |

Detail of age mix of practice population and PPG:

| %        | <16           | 17-24       | 25-34       | 35-44         | 45-54         | 55-64         | 65-74         | > 75          |
|----------|---------------|-------------|-------------|---------------|---------------|---------------|---------------|---------------|
| Practice | (1898)<br>18% | (896)<br>8% | (826)<br>9% | (1214)<br>11% | (1736)<br>16% | (1398)<br>13% | (1369)<br>13% | (1404)<br>13% |

|  |  | PPG | 20% | 10% |  | 40% | 30% |
|--|--|-----|-----|-----|--|-----|-----|
|  |  |     |     |     |  |     |     |
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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<br>African | White<br>&Asian | Other mixed |  |
| Practice | 45%     | 15%   |                          | 5%          | .01%                          | .01%                    | .02%            | .02%        |  |
| PRG      | 90%     |       |                          |             |                               |                         | 10%             |             |  |

#### A LARGE % OF THE POPULATION HAVE NO ETHNICITY RECORDED

|          | Asian/Asian British |           |             |         |                | Black/African/Caribbean/Black British |           |                | Other |           |
|----------|---------------------|-----------|-------------|---------|----------------|---------------------------------------|-----------|----------------|-------|-----------|
|          | Indian              | Pakistani | Bangladeshi | Chinese | Other<br>Asian | African                               | Caribbean | Other<br>Black | Arab  | Any other |
| Practice | .07%                | .02%      | .01%        | .01%    | .02%           | .01%                                  | .01%      | .01%           |       |           |
| 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:

Our PPG is an established one, so already has a mix of gender, age & ethnicity. There are occasions where, if a PPG member resigns, we will actively recruit back into that position by targeting any area of representation we feel we are missing/lacking. This is done by advertising in our quarterly newsletter, on our website & the GP's will discuss with patients in consultations (if it is appropriate to do so). We have recruited successfully into the 17-24 age groups using the one to one approach.

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:

Open afternoon attendance (7<sup>th</sup> June) where over 60 patients visited the surgery to discuss & find out more about medicines/waste management, the surgery's imminent decant into portakabins & new premises in October, emergency care in Solihull, and support available for carers in Solihull.

Use of SMS

Use of notes on prescription requests

Suggestion box

AGM opened out to all patients

Advertising minutes on website

Talking to different age groups in consultations about becoming members of PPG- Friends & Family – comments and information from PPG Committee

Patients that had shown an interest at the open afternoon were encouraged to get involved with projects such as the website & newsletters (i.e photos)

Notice boards

Patients offered meetings with Practice Manager to discuss ideas

Invitation to open afternoons starting 28<sup>th</sup> March 2015, via SMS & posters in the surgery & around the community. The 1<sup>st</sup> of four planned by the PPG in conjunction with the Practice. 35 patients attended, and heard a talk on healthy diet, & exercise, & took part in some 'Qi-Gong' at the end of the session

New members at meetings

How frequently were these reviewed with the PRG?

Meetings were held bi monthly with feedback discussed when appropriate, as a result of an open meeting we chose to change to monthly and offer out 4 'open meetings' a year.

3. Action plan priority areas and implementation

### Priority area 1

**Description of priority area:** Patient knowledge and understanding/engagement in the refurbishment & extension of the surgery, & move into portacabins. The works began in January 2014, with the surgery itself being effected firstly by changes in parking from April 2014, then a 4 month relocation into portacabins starting 21<sup>st</sup> July, and finally a move back into larger refurbished premises from late October 2014. As a very busy surgery, with a high elderly demographic, the PPG felt it important to keep patients as positive and informed as possible during this process.

# What actions were taken to address the priority?

The PPG have met with Sainsbury's representatives to discuss matters important to patients, such as access, & safety. As a result a number of changes were taken on board and made by Sainsbury's (such as changing the entrance to a consultation room for better wheelchair access; push pads to allow safe access out of the premises – a controlled automatic door, to prevent children running out onto a busy car park entrance, as well as barriers outside the surgery entrance for the same reason). One member of the PPG has been given access to the detailed plans and has been able to point out a number of issues that perhaps were not apparent to the developers, such as where an ambulance may park & have access if escorting a patient from

All publications produced by Sainsbury's have been made available on the surgery's website, from regular newsletters to information about changes in road layouts/weekend working. We also arranged for Sainsbury's to install notice boards in the surgery that have copies of the newsletters pinned to them.

A representative from the Sainsbury's contractors was invited to an open afternoon held by the surgery/PPG (as part of the NAPP Patient Participation Awareness Week), so that concerned and/or curious patients could come and look at detailed plans and ask questions regarding the move to the portacabins/car parking availability. Mark Smith, who works for RG Group (the construction management company), supplied large posters showing aerial plans and artists impressions.

Curious patients look Sainsburys Mark Smith 1. JPG at portacabin plans. J corner. JPG

the surgery to an ambulance.

The open afternoon plus an update on what was happening with the development was advertised in the Spring newsletter –

produced a week earlier than normal (arranged by the Vice Chair of the PPG), so more patients would know about the open afternoon.







WEB Dorridge

WEB Dorridge

Dorridge Newsletter Surgery Newsletter S Winter 2014. pub

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

The continual engagement with the patients and carers, keeping them informed throughout, enabled the extremely complex moves.. Both into the temporary accommodation and back into the extended & refurbished surgery to be carried out with the minimal disruption to the service. The result was plublicised on the updated and extended surgery website.

The open afternoon was well attended, with over 60 patients in attendance – the Sainsbury's representative was inundated with questions, as the move to temporary accommodation & the new building were high on our patients agenda!

The only problem that arose during the porta-cabin period, as far as patients were concerned, was car parking for patients visiting the surgery. This was guickly solved, to a large extent, when Sainsburys were asked to provide car park patrols by the Practice Manager as a result of patient feedback.

Working with Sainsburys we provided new specific newsletters, produced by Sainsburys, over the course of the works, & these were advertised both in the surgery and uploaded to the website. This enable patients to be kept informed of what was happening & when, and the transition throughout 2 moves in 5 months went ver smoothly.

Even following our residence in the new surgery we have continued to take feedback from patients on improvements needed. Our suggestion box is now at it's busiest, & we are advertising in the lobby both what the suggestions are & what we have been able to do as a result. Coming out of this feedback we have provided umbrella stands for patients, invested in a new high backed chair for disabled patients, & changed how the children's books are presented so they are both attractive to our younger patients & stored in a safer manner.

# Priority area 2

**Description of priority area**: Waste Medicines Management. In Solihull each year it is estimated that £750,000 is lost due to poor management of medicines/wasted medicines. Our PPG wanted to highlight this issue to our patients and see what advice and support could be provided to help individuals realise they can have an impact on reducing this amount of waste.

What actions were taken to address the priority?

In the window of the surgery (seen inside and out), plus along the walls in the waiting room, we have put posters up that refer to Solihull CCG's campaign to reduce waste.



2014\_02\_03\_Medicin es\_Waste\_A6\_PRINT

We have also put an electronic version of this leaflet on our website, on the page that refers to how to order repeat medication on line - <a href="http://www.dorridgesurgery.co.uk/details.asp">http://www.dorridgesurgery.co.uk/details.asp</a>

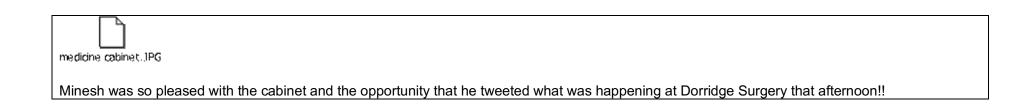
Our prescribing pharmacist attended our open afternoon, and had displays of the attached presentation, as well as having it available on a laptop

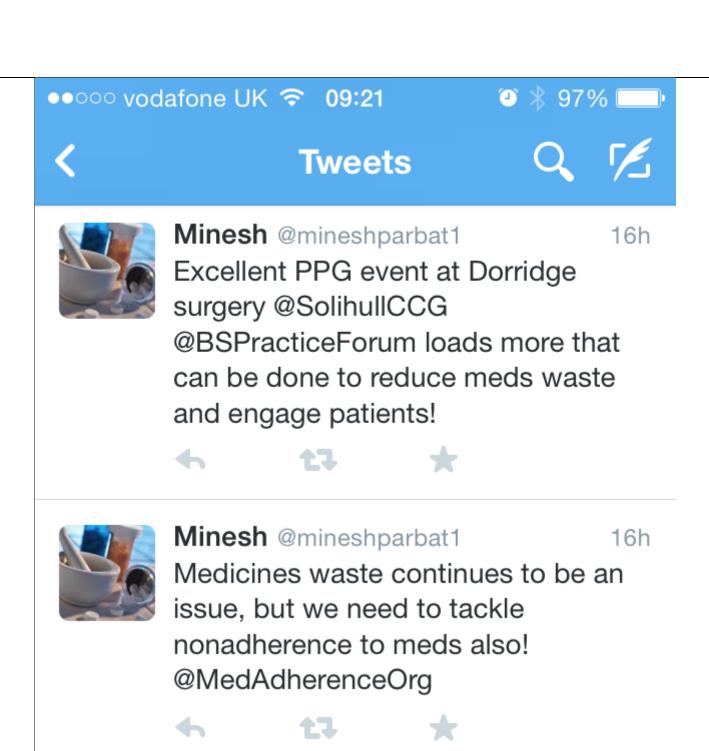




PPG\_mtg\_25 07 Dr Davenport and Minesh Parbat PSP Minesh Parbat PSP 13 - medicines wastMinesh discuss mediciand the Practice Man and the Practice Man

Two of our PPG members (one of whom works as a pharmacy technician) worked hard to create a mocked up medicine cabinet, with a view to giving a visual representation of what stock piling medication may look like in their own home (or that of a relative/friend that they may be caring for). The patients (young and old) were then challenged on the day to put a figure on how much the medicine in the cabinet was worth! When they were told it amounted to around £75 it put the £750,000 into some context, helping patients to realize how just a little thought about how much you order can make a real difference!





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

Minesh – the surgery's PSP, is to be included in a furture special event planned around respiratory conditions

Quote from a patient "One cause of medicines wastage is when several items are prescribed over a period and a loss of synchronisation occurs, resulting in an accumulation of one or more medicine and this point was communicated well by Minesh, helping patients to understand what they could do to revent wasting medicines"

We advertise the statistics of waste medicines on our website & make available the leaflets in the waiting room to highlight the issue to patients.

| Priority area 3  |
|--|
| Description of priority area: Keeping patients informed about changes in emergency care and Solihull services  |
| What actions were taken to address the priority?  Professor Matthew Cooke was invited to our open afternoon where he was happy to discuss the transformation of healthcare in Solihull with our patients.  Professor Matthew Cooke and a patient i |

We also made available via a screen & projector the animation from the Kings Fund, to give patients an idea of how the NHS works at its highest level, what has been & is going to change.

- http://www.kingsfund.org.uk/projects/urgent-emergency-care/alternative-guide-urgent-and-emergency-care-system-england

The Vice Chair plus another PPG member and the Practice Manager are working on a new website, where the intention is to keep information up to date, local and useful.

We also engaged Solihull Carers associastion with the surgery, and a representative attended our open afternoon. She was able to help a number of patients who either know of neighbours in need of help or are carers themselves, with information and advice on what is available in Solihull. She is due to meet with the Practice Manager and discuss the pathways available for carers, and how GP's can refer people in the best way.

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

The new web site is now active and is very much more patient friendly. There is a very comprehensive provision of information of what services are available in the Surgery and clear details as to how these may be accessed.

Probably the most valuable contribution that the PPG (and especially lan) has made over the last year is the development of the new website. It is so much more user friendly than the old site and this is due to the practice being willing to listen to suggestions from the patients on what was most important to them.

We now have a specific notice board for carers, & have included on this board the Solihull Carers Strategy statement from Councillor Ken Meeson & Keymn Whervin, Vice Chair of the Carers Partnership Board, as well as having a simple referral guide for all GP's to easily refer a carer to a service, and a template set up so that any GP/Nurse or non-clinical team member can easily & quickly add to a patient's record that they are either a carer, or have a carer – a simple policy is available to all staff that includes forms that patient's can complete to notify us of their carers role and/or giving permission for carers to access the cared for persons records, to help make dealing with medical matters easier all round. The template allows for easy reporting on the number of our patient's who are carers or who do have a carer. This all happened as a result of inviting the Carers Org

representative to our open afternoon in June, & she was able to engage with a number of patients there who either were carers or knew someone who could use help. She took away a few referrals with her. We are considering whether to have a regular drop in session at the surgery run by the carers organistation, to help answer questions/support those who are carers. This will be up for consideration 2015/16 as a next step from this years acheivements.

The PPG members wrote a few testimonials following the afternoon, & these along with the photos listed in this document were advertised on the PPG page of the website:

PPG feedback from the Open Afternoon 7th June 2014

#### lan

"What a vibrant day. A really good opportunity to interact with the staff at the Surgery, bringing us up to speed on the future developments and highlighting in many ways the challenges ahead"

#### Val

"The PPG's second open day was even more successful than the first and at times the Surgery's waiting room was so full that there was scarcely room to move around. Many of the people who came wanted to talk to the representatives from Sainsbury's, Pharmacy advice, Solihull hospital and the local carers organisation but for the members of the PPG it also gave us the chance to talk to other patients and listen to their concerns"

#### Gerald

"I thought the event overall went very well indeed. After a rather slow start, there was a steady stream of people (I use that term instead of Patients as I spoke to some who were not currently registered with the Surgery and were checking us out.)

Unfortunately the visual display at the end of the corridor was something of a failure and more "idiot friendly" material needs to be found if we do it again. People by and large just did not understand it all.

In previous years, we had scores of complaints regarding phone access and the inability to get appointments but this time I think there was a general acceptance that the best was being done under difficult circumstances and there was light at the end of the tunnel. However, if things are not markedly

improved when we get back to normal then this forbearance will quickly disappear.

The subject of Sainsbury's created a lot of interest but again the fact that the evidence of progress was clear to see I think most folk went away satisfied with the information they gleaned.

The wasted medicine cabinet was a good idea and many people said they were amazed at the costs involved.

Finally, having individuals there covering their own specialties was much appreciated by the visitors"

#### Anne

"The surgery open afternoon on 7th June gave Dorridge residents a chance to ask questions of the invited experts including a representative from Sainsbury's who was kept busy giving people more information about the temporary relocation of the surgery whilst the present building is renovated and extended and the layout of the new surgery. Also present were Matthew Cooke with information about changes to urgent care and plans for the future of Solihull Hospital and Minesh Parbat, a pharmacist from Solihull C.C.G. He was keen to speak to people about the tremendous waste of returned medication often due to the over ordering of repeat prescriptions which costs a considerable amount of money which could be better used elsewhere in the system.

Those who attended welcomed the opportunity to update themselves on future changes"

### 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):

Dorridge PPG has always wanted to work towards improving communication between the practice & its patients, and has continued to try and do this since it began. The PPG/Practice continues to produce a newsletter to educate patients about their health & about changes that are happening at the surgery, such as the introduction of EPS, and the online booking of appointments & prescriptions. The style of this newsletter has developed, as has it's distribution, as we think of more ways to reach as many of Dorrdge Surgery's patients as possible. To connect patients with the practice in a more approachable way, all the staff have had their individual photo uploaded to the new website, and hard copies are due to be put in the lobby of the surgery premises, so patients can put a face to a name. The PPG took the decision to join NAPP some years ago, but over the past 3 years has used the newsletters and commuications provided by NAPP to develop the group & its' involvement/voice even further. This heralded Dorridge PPG opening it's doors the the public as part of the National Patient Particitpaion Group Awareness Week (held 1st week of every June). Our first successful open afternoon in 2013 had a subject of 'Meet the PPG', advertised through posters, the old website, text messages to the patient population, and had a turn out of around 50 patients. Following this, to highlight even further what the PPG is all about & who is involved, the PPG, when producing the quarterly news letters, began to do a 'spotlight' on a PPG member, following that first successful open afternoon. In every edition now there is a photo of a PPG member along with their own article of who they are & their history. The PPG as part of it's NAPP membership, entered the 'Corkhill Awards' in 2014 & came 6<sup>th</sup>!! We are due to enter again this year & hope to improve on that position! The 2013 open afternoon was such a success that this formed the basis of the 3 priority areas for 14/15, and has also led onto us organising more specific health & social related events throughout 2015, the 1st of which was held on Saturday 28th March. The event was titled 'Living a Healthy Lifestyle' & was presented by a personal fitness coach with experience in both nutritional & excerise advice. The Parish Church Hall was filled with our patients, & they had the experience of QiGong – half an hour of gentle excerise led by Adrian Johnson. The PPG with the surgery is holding a respiratory event in June, a diabetic event in spetember (as we have a large cohort of patients with these LTC's), & a general 'look after yourself' in Winter event in December (looking at falls prevention, flu vaccines, 'Winter Warmth' etc. We believe that by making such events available to our patients, along with promotion of 'Extend' 'ThaiChi' 'Line dancing' & 'Striders & Strollers', along with keeping patients abreast of changes/improvements at the surgery (online access/EPS etc), that we are supporting both the health of our population as well as accessibility of the surgery.

# 4. PPG Sign Off

Report signed off by PPG: YES

Date of sign off: 30/3/2015

How has the practice engaged with the PPG:

How has the practice made efforts to engage with seldom heard groups in the practice population? Widening the availability of the newsletter (by making it available in other outlets in the community – butchers/pharmacy/post office), handing it out with new patient registration packs, making it available on the website, highlighting on prescriptions, having a dedicated notice board in the surgery, running health events in the community (to both general & targeted groups of patients)

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

How has the service offered to patients and carers improved as a result of the implementation of the action plan? As a member of the PPG it has been pleasing to have our opinions consulted at the planning stages of the new surgery and to know that at least some of our suggestions such as changes to the design of the entrance have made a difference to the patient experience in the new building. But I think probably the most valuable contribution that the PPG (and especially Ian) has made over the last year is the development of the new website. It is so much more user friendly than the old site and this is due to the practice being willing to

listen to suggestions from the patients on what was most important to them.

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

| The PPG:Production of the quarterly newsletter, re-modeling the website and changing the image of the practice, operating the 'Extend' exercise classes and Thai Chi classes, plus running 'Striders & Strollers'. Representing the PPG on the borough wide PPG Network, the Chair & Vice Chair are members of the Solihull CCG ERG Board as patient representatives, and last but not least representation on the Consultative Health Council for their Solihull Patients Group. |
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