Pool Health Centre –2014/15 Patient Participation Report

Prepared in Accordance with NHS England Area Team 2014/15 Patient Participation Enhanced Service – Reporting Template

Practice Name: Pool Health Centre

Practice Code: L82041

Signed on behalf of practice: Stephen Holby Date: 16th March 2015

Signed on behalf of PPG: see 4 below Date: 26.3.15

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

Does the Practice have a PPG? YES

Method of engagement with PPG: Email

Number of members of PPG: 35

Detail the gender mix of practice population and PPG:

%	Male	Female
Practice	50	50
PRG	43	57

Detail of age mix of practice population and PPG:

%	<16	17-24	25-34	35-44	45-54	55-64	65-74	> 75
Practice	21.4	9.9	13.5	11.9	14.5	12.2	10.0	6.6
PRG	8.6	11.4	8.6	17.1	20.0	8.6	11.4	14.3

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Detail the ethnic background of your practice population and PRG:

	White				Mixed/ multiple ethnic groups			
	British	Irish	Gypsy or Irish	Other	White &black	White &black	White	Other
			traveller	white	Caribbean	African	&Asian	mixed
Practice	10,889	9	0	718	4	11	7	14
PRG	33	0	0	1	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	5	10	0	5	7	1	1	0	0	246
PRG	0	0	0	0	0	0	0	0	0	1

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:

The Practice compares the age/gender/ ethnicity of patients on its list with those of the patients in the PPG and invites additional members into the latter to maintain a broadly similar representation.

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:

The main source of feedback the practice has with its patients consists of the regular day-to-day interactions between those patients and our clinicians and staff. It is revealing that the guidance provided by the Health Authorities does not list include such interactions. We do however also consider feedback from a range of other sources including the patient survey, complaints and suggestions and feedback from FFT questions.

How frequently were these reviewed with the PRG?

Issues are reviewed ad hoc throughout the year.

3. Action plan priority areas and implementation

Priority area 1

Description of priority area:

Maintain and seek to improve services in the face of financial pressures.

What actions were taken to address the priority?

Patient consultation, through PPG, by way of website and using FFT regarding co-operation with and combination with other surgeries.

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

Pool and Homecroft surgeries have been successful in combining some back office functions and mutual support which have helped both to maintain services. We are continuing to liaise with our PPG over our plans and will keep the broader patient population advised by way of the patient information screen and the website. Engagement with PPG's/patients of the two surgeries has identified very similar attitudes, concerns and priorities as might be expected given the fact that the area covered by the two surgeries is practically identical and we continue to engage with patients in the fight to preserve the NHS.

Priority area 2

Description of priority area:

Extending access to local GP services.

What actions were taken to address the priority?

Since funds were not available from the NHS for individual practices to go beyond the limited scope of the enhanced services for extended hours (30 minutes per 1000 patients), we combined with other practices in the North Kerrier Locality of the Kernow Clinical Commissioning Group to commission an urgent care centre at Camborne Redruth Community Hospital (Barncoose).

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

The new service has recently opened and is currently being publicised mainly through the local practices engaging with patients. This is to ensure that it is built up in a viable manner. More general publicity is planned in due course but this would have risked overwhelming the service if conducted prematurely and before sufficient staff were engaged to deal with probable demand.

Priority area 3

Description of priority area:

Improving contracted Out of Hours services.

What actions were taken to address the priority?

The Practice undertook to engage with Kernow Clinical Commissioning Group in the re-commissioning of out of hours services following serious public concerns (as reflected in the proceedings of the Parliamentary Select Committee) over the performance of the major PLC appointed by the former PCT in preference to the service which had previously been offered by a co-operative of Cornish GP practices.

The Practice worked with KCCG and with other practices to engage in a re-tendering of the out of hours service.

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

The service was recently recommissioned and a new provider appointed to take up the OOH when Serco's contract terminates in May 2015. We will disseminate all information provided to us by the commissioners / providers by way of the waiting room screen and the website. A more co-ordinated approach to services provided from a variety of sources outside core surgery hours (including the new acute service referred to in 2 and the Minor Injuries Units) will offer appropriate access to patients with less duplication and less scope for confusion.

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): The Practice has carried out all the actions set out in previous years' action plans.				

4. PPG Sign Off

Report signed off by PPG: YES

Date of sign off: Pool Health Centre maintains a virtual PPG communicating by e-mail and we circulated a draft of this report by e-mail to all members. The guidance we have received indicates that in the case of a virtual group 'sign off' should be interpreted to mean that PPG members are content with what the report contains. On the basis of feedback received as at 26.3.15 we are satisfied that this requirement has been met.

How has the practice engaged with the PPG?:

How has the practice made efforts to engage with seldom heard groups in the practice population? Has the practice received patient and carer feedback from a variety of sources? Was the PPG involved in the agreement of priority areas and the resulting action plan? How has the service offered to patients and carers improved as a result of the implementation of the action plan? Do you have any other comments about the PPG or practice in relation to this area of work?

The Practice engages with patients by way of continuing contacts with them individually as well as through PPG, patient surveys, FFT, e-mail, website and use of the waiting room screen which provide us with feedback from patients and carers. All these routes, not least the responses we receive through the PPG, contribute to the development of priority areas and actions to fulfil them. The Practice's scope for improving services to patients is limited by funding constraints, which is why we have concentrated on protecting services through linking with other practices and the use of commissioning. We are delighted that the feedback we receive has consistently been overwhelmingly supportive and we look forward to developing our future plans in liaison with the PPG and with our patients in general.