


NHS England - Cumbria and the North East 2014/15 Patient Participation Enhanced Service Reporting Template

Practice Name: Seaton Surgery

Practice Code: A81612

Signed on behalf of the practice: 

Signed on behalf of the PPG: 

Dated: Prerequisite of Enhanced Service – Develop/Maintain a Patient Participation Group (PPG)

Does the Practice have a PPG? Yes									
Method of engagement with PPG? Email and telephone									
Number of members of PPG: 20+									
Detail the gender mix of practice population and PPG:					Detail the age mix of practice population and PPG:				
%	Male	Female							
Practice	50.5	49.5							
PRG	31.1	68.9							
%	<16	17-24	25-34	35-44	45-54	55-64	65-74	75+	
Practice	18.6	7.7	12	13.1	15	14.5	10.7	8.2	
PRG	1.6	6.6	6.6	13.1	28	19.7	18	6.6	

Detail the ethnic background of your practice population and PPG:

	White				Mixed/ multiple ethnic groups			
	British	Irish	Gypsy or Irish traveller	Other white	White & Black Caribbean	White & black African	White & Asian	Other mixed
Practice	94.6	0.03	0	0.4	0.3	0	0.2	0.03
PPG	96.7	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	0.4	0.07	0	0.1	0.7	0.1	0.06	0.03	0	0
PRG	3.3	0	0	0	0	0	0	0	0	0

Describe the 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 over represented by female members. We have continued throughout the year to advertise on our website, in our practice leaflet, posters in the waiting room and this is also mentioned at health checks when new patients register with us. Our PPG is also proportionately represented by other ethnic groups. We have also managed this year to recruit a member to our PPG under the age of 16 years.

Are there any specific characteristics of your practice population which means that other groups should be included in the PPG? Eg. A large student

population, significant number of jobseekers, large numbers of nursing homes, or a LGBT community? Yes

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

We do have a significant number of elderly patients and feel that these patients are well represented by our PPG.

Has the Practice developed and maintained a PPG that gains the views of patients and carers and enables the practice to obtain feedback from the practice population? Yes

1. Review of Patient Feedback

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

Results of previous year's survey, National GP survey, Friends and family Test, suggestion box/complaints and compliments.

How frequently were these reviewed by the PPG? Biannually.

Has the PPG and practice staff reviewed patient feedback received by the practice on a regular basis? Yes

Has the practice and PPG developed and agreed an action plan (based on three key areas) and agreed how the practice will implement improvements? Yes

Has the Practice publicised actions taken to practice population including providing the PPG with updates on progress and assessment of subsequent achievement within timescales agreed? Yes

2. Action plan priority areas and implementation

Priority area 1

Description of priority area:

Relocation to new premises due to our current premises being half the size recommended for our patient list size and not being fit for purpose to meet CQC standards.

What actions were taken to address the priority?

The group this year agreed that priority should be given to securing new premises. A survey was sent to our PPG in the summer of 2014, we received overwhelming support for the move with some fantastic comments. The patient group agreed that the current premises were not fit for purpose; the Practice purchased a property and submitted an expression of interest to NHS England. Disappointingly this has not progressed as quickly as we would have liked, however this is an on-going venture. The Clinical Commissioning Group, local council and patient group are supportive of the move. Contact has recently been made with NHS Property Services and we will now be progressing to submit a project initiation document. We will be contacting the patients again for further support once the development reaches the stage of public engagement.

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

We emailed patients to ascertain their support for this venture. Unfortunately the progress to move things forward to enable the move to take place has been a slow process with the milestones that need to be reached to enable NHS to approve the move. This has had an impact on patients, carers and staff at the surgery as we are not able to put on extra services required due to availability of rooms. This has been publicised in reception and on our website.

Priority area 2

Description of priority area:

Medication Waste

What actions were taken to address the priority?

The practice actively promotes medication waste reduction. All clinicians, during medication reviews, have one to one consultations with

patients and discussed appropriate usage and if alternative medication was available and appropriate. The practice worked with the NECS Pharmacist and we audited patients on HRT to ensure medication was appropriate. This resulted in patients being taken off HRT medication in a timely manner.

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

The Patient Group agreed to look at medication waste reduction. The Practice strives to maintain a healthy budget and is among the lowest spend per head in the CCG area. The Practice continually audit our prescribing in an effort to provide best value for money for our patients, this also ensure that Best Practice is always followed resulting in safe prescribing for our patients. The Practice has demonstrated savings of over £4000 to date for medication waste reduction and this will continue into 2015/16.

Priority area 3

Description of priority area:

Increase on-line services. Allow patients to request prescriptions electronically and also increase awareness of availability of on-line booking of appointments.

What actions were taken to address the priority?

The Practice met with a NECS who provided support from a Pharmacy Technician to train the staff in this area. The practice also met with the local Pharmacist, Seaton Pharmacy, to discuss this further. The staff have received training on electronic prescribing and this has been advertised in the waiting area and on our website. Staff are proactive in signing patients up to our on-line services and this is also advertised on our web-site.

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

Patients will be able to have their prescriptions sent directly to a pharmacist of their choice. This includes acute and repeat prescriptions. This

provides an improved level of service for our patients. This was advertised in the practice via posters and makes it easier for patients to obtain their prescriptions, saves time in not having to attend the surgery. Prescriptions can now be requested electronically and also sent electronically onto the pharmacy. This has the impact of time saving for Practice Staff. In March 2015 it has been made available for patients to view their summary care record on-line. This shows medication issued in the last 12 months and allergies recorded on our clinical system. Patients and carers now being able to book and cancel appointments on-line has positively impacted on both the surgery staff and patients' time.

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):

Overall patients appear to be very happy with the service received from our Practice. This was highlighted in the CFEP survey which showed a 95% overall satisfaction rate with the Practice. The Practice was extensively refurbished in 2014 with removal of all carpets and replaced with PolyFloor, despite this it is evident that we have outgrown the premises and this is something to be addressed at present. On line services have been increased with the introduction of EPS and we continue to promote this in-house and on-line. Clinicians have received training on the use of electronic Patient Information Leaflets. The results of this year's GP patient survey (MORI) have demonstrated that patients' satisfaction has improved with 90% saying that the last GP they saw or spoke to was good at explaining tests and treatments.

3. PPG Sign Off

Report signed off by PGG:



Date of sign off:

17 March 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?

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?

We have engaged with our PPG primarily via email but also on the telephone and face to face. The practice continues to advertise and promote the Group to all patients and notices are displayed in the waiting room and on our website. We have received patient feedback from GP patient surveys and via Friends and Family Test. The PPG were involved in all stages and agreed the action plan which was publicised on our website and displayed in our waiting room. Services offered will have a massive impact on patients care once we receive the go ahead for premises relocation and although this is not moving forward as quickly as we would like, this is an opportunity to move the Practice forward with increased services and improved patient care.