SELLINDGE SURGERY PATIENTS' PARTICIPATION GROUP (PPG)

Professionals and Patients in Partnership Working Together

SSPPG Report 2014 – 2015

Sellindge Surgery has 2,322 registered male patients and 2419 registered female patients.

There are two patient participation groups; a physical group with 10 members made up of 7 females and 3 males and a virtual group with 28 members made up of 18 females and 10 males.

The tables below give a breakdown of ages and ethnic origins.

Detail of age mix of practice population and PPG:

%	<16	17-24	25-34	35-44	45-54	55-64	65-74	> 75
Practice	867	344	447	567	794	690	626	406
PPG				1	7	7	20	3

Detail the ethnic background of 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	4245	11		120	4	2	25	4
PPG	38							

			Asian/Asian Br	Black/African/Caribbean/Black British				
	Indian	Pakistani	Bangladeshi	Chinese	Other Asian	African	Caribbean	Other Black
Practice	6	3		4		4	1	2
PPG								

	Other					
	Arab	Any other				
Practice		1				
PPG						

309 Patients do not have their ethnicity recorded

In spite of promoting the groups again this year, via the surgery website, promotional material in the waiting room and again the presence of PPG members in the waiting room for 2 weeks handing out the Surgery Survey questionnaire, we gained no new physical members, and actually saw a reduction in the virtual group membership from 33 to 28.

Feedback

There are several ways for patients to feed back to the practice their positive or negative experiences; a post box in the waiting area of reception, the NHS choices website and the newly introduced friends and family test. Also any member of staff is happy to receive feedback.

The practice received very little feedback this year, with 4 reviews being added to the NHS choices website. The friends and family test has produced more feedback and we are pleased to note that we have only had 2 with comments that are negative.

Any feedback received will be reviewed at the 3 monthly PPG meeting following receipt of the feedback. The friends and family test results will be discussed at these meetings also.

Priority areas for this year

Following discussions at a PPG quarterly meeting the group decided to make Medicine wastage a priority for this year.

The group discussed the cost to the CCG of wasted medications and decided to use this year's patient survey to try to educate patients in the ordering of and use of prescribed medications in order to reduce the huge cost of wasted medications

Following the above discussion, the Practice Manager drafted a survey with suggested questions. This draft was circulated at the next PPG meeting (as this was only 1 month away) and was sent by email to the virtual group for their comments. Once agreed, the final survey was printed and the PPG group organised a rota for members to attend the surgery to hand out the survey and take the opportunity to chat to patients about the work of the PPG, with a view to encouraging new members.

A section concerning medication waste was included in the latest newsletter.

The Practice Manager has arranged for a representative from Medicines management to attend the next PPG meeting (May 2015) to talk about prescribed medications and the amount of waste.

The results of the patient survey are being collated and will be discussed at the PPG meeting in May. The results and a report will then be made available to patients via posters in the surgery waiting room and on the practice website.

Hopefully this piece of work will make patients and carers more aware of what medications they already have at home before placing their repeat order.

The second area of priority was the annual Health Promotion Evening. Every year Sellindge Surgery PPG arranges a Health Promotion evening. The subject of the evening will be discussed at a PPG meeting; the group will try and pick a topic that is either current in the media or that has a particular interest to a member of the group.

Once a topic and date is decided on, the group and the practice work together to organise speakers and advertising. These evenings are always a success in terms of patient interest, and have yielded the occasional new member to the group.

This year's health promotion was rheumatoid arthritis which is of special interest to one of the group members. A consultant from the hospital spoke about this condition and a patient suffering from the condition spoke about what it is like to live with the problem

The evening was a success and a brief summary of the evening was published on the practice website

The subject and date for the coming year's health promotion evening was discussed at the February 2015 PPG meeting and will again be held in September.

The third priority area addressed by the PPG was 'taking away patient choice in where to collect prescriptions'

The practice manager received a letter informing her that any patient who lived closer than 1.6 miles, as the crow flies, to a pharmacy other than Sellindge was no longer able to be a dispensing patient with Sellindge Surgery.

As there was no physical meeting due, the letter was emailed to both PPG groups for their opinions and suggested action.

Several angry responses were received from members of the groups who wanted the practice to challenge this on behalf of the patients affected. The feeling was that this decision was in fact taking away the patient's right to choose where they want to collect their prescriptions.

A letter was written by the practice challenging the decision.

As a result of the letter the distance was extended slightly to 1.8 miles. This meant that fewer patients were inconvenienced by the change.

This was fed back to the group at the January meeting.

Progress on previous years priorities

The action plans agreed with the PPG for the last 3 years have been around the use of A&E and the education of patients to alternatives such as NHS 111.

The practice changed the structure of its afternoon appointments and included 6 emergency slots only bookable after the morning emergency clinic had finished in an attempt to make it easier for patients to see a doctor in the afternoon and therefore in some cases negate the need for an A&E visit.

The morning emergency, no appointment system is held each weekday morning and is discussed regularly at the PPG meetings to ensure this is still effective for patient; the surgery continues to monitor the use of the afternoon emergency slots.

Unfortunately, when comparing A&E attendances for our patients this year to a similar period last year, very little change has been noticed.

The surgery continues to ensure that reception staff encourage patients to attend the practice where ever possible, promoting our morning emergency clinic. Reception staff are also reminded of the existence of local minor injury units and NHS 111.

Our practice website has a section dedicated to Out of hours help and self-help, stressing that A&E should be used for serious injuries and illnesses only.

3

The Survey

This year's practice survey was handed to patients attending the practice during February 2015 and as previously mentioned concerned medicine wastage.

The results of the survey are being collated and will be discussed at the May PPG meeting, following which the results will be published.

We are hoping that following this survey, patients will be much more aware of careful ordering of their prescription items, which in turn will lead to a reduction in the amount of medicines wasted.

Sellindge Patient Participation groups would like to recruit more members; ideally with different backgrounds.

If anyone is interested in becoming a member, please contact the practice for details.

Jan Bennett March 2015