

Paxton Green Group Practice

Patient Participation Group

Annual Report

2016 – 2017

This is the 3rd annual report of the Paxton Green Group Practice Patient Participation Group (PPG). The PPG currently has 116 enrolled patient members; 9 more than in 2016.

Nationwide, a PPG's business is to collaborate with its practice to improve patient care, and at Paxton Green, our activities are documented in the bi-monthly PPG meeting notes sent to all members. The steering group has continued to meet between these dates as well as with the Practice each quarter and we have established several specific task sub groups.

In last year's annual report we looked forward to more PPG members contributing to our activities. This has happened and we are grateful to every member who has volunteered through meetings, supporting Self Care Week, contributing to focus and sub-group work, offering a professional perspective or representing the PPG at external meetings. This has grown our capacity. Thank you all.

All this work has been progressed in collaboration with the Practice and it has been informed by findings from the PPG led 2016 Patient Survey. In turn, the survey informed the Practice's projects for the Lambeth CCG Incentive Scheme, designed to incentivise Lambeth practices to grow their PPGs, and it has all supported the 3 PPG priorities agreed for the last 2 years.

417 patients participated in the 2016 survey and the quantitative results were reported to the PPG last autumn. The majority of free text comments fitted in broad themes around communication, including electronic, and specific service and operational matters which the steering group and Practice have discussed and actioned accordingly.

Many of these comments informed Paxton Green's two projects for the Incentive Scheme, which were:

1. Reduction in DNAs (a PPG priority)
2. Enhanced patient access to practice information sources (comms and H&WB priorities)
 - a. improving patient access to digital information sources
 - b. review of patient information displayed in the practice
 - c. review the way the practice informs patients of test results/actions

2.a and c were delivered through an innovative Quality Improvement Project Placement providing a valuable opportunity for KCL medical students to gain primary care learning and, we hope, to encourage them to consider a career in primary care, especially given the current GP recruitment challenges. 2.b. was progressed by the PPG (below).

PPG members recently agreed to refresh our priorities going forward and to update:

1. DNAs. We sought to reduce appointment wastage, and thereby make more booked appointments available, by exploring the reasons why patients fail to cancel appointments and we increased the accessibility of information about how to cancel appointments. The DNA rate fell to 11%, from 14% at the start of the project and the Practice has ongoing action for DNAs. Therefore, we are refreshing this priority and currently talking with the Practice about how:
 - a. it continues to monitor the DNA rate and manage DNAs
 - b. to replace this priority with another specific service priority
2. Self care and health promotion. This remains PPG core business and we continue to invest in opportunities to encourage self care and health promotion, through self care week, the newsletter and the year's pilot of supporting the Practice nurses with promoting national annual campaigns for common conditions. Within this work stream we plan to host a drop in self care event for Practice patients coded as carers and we are actively promoting an initiative for supporting informal carers across Lambeth and Southwark.

The LCCG 2016 incentive scheme is not being replicated in 2017 but the GP delivery framework stipulates practices work with their PPGs on elements of promoting self care

and, again, we are currently talking with the Practice about how we can best do this, generally and in Self Care Week in November.

3. Communication. Across the last year and within the Incentive Scheme project 2.b., the priority to improve communication across the Practice focused primarily on the public display areas in the Practice and the Practice has set up a working group to take forward the PPG's report recommendations. As the Incentive Scheme money has been put towards the Practice's new website the proposal is that the PPG's priority to improve communication will continue in 2017 with an emphasis on the electronic spaces. This will also embrace and progress the 2016 QIPP work.

Other core business had included PPG representation in the LPPGN, on the SE Lambeth locality forums and at external meetings and the production of the quarterly PPG newsletter which continues to augment all the PPG's work and provides all patients with Practice and health information. We remain alert for opportunities both to better market the newsletter to a higher proportion of the Practice's patients and for the ongoing development of the PPG, to become more representative of the patient population and to work more efficiently and effectively with the Practice to improve patient care at Paxton Green.

None of this is possible without PPG members volunteering in whatever way is individually feasible and everyone's active participation has contributed to our growth from the Friends of Paxton Green to being its patient led PPG today. Deliberately, the PPG has retained draft terms of reference for the last 3 years and so, later this year, as we now have a cycle of experience to draw on, the steering group will present proposals for the 2018 PPG election to better secure the sustainability of the PPG going forwards in collaboration with Practice. Please accept my sincere thanks to everyone, patients, including the steering group and Practice staff, for your support of our Practice through our PPG throughout the last year. Thank you everyone.

Helen Bristow, PPG chair, July 2017