



Communications Project

Final Report.

Introduction.

In 2018, the Patient Participation Group (PPG) discussed issues around communication, not only between the Practice and its patients, but also as a group how we communicate with other patients. This latter point was identified in a patient survey conducted in late 2015.

It was agreed to establish a project group to examine the processes that are currently in place. The project covered a large range of issues from electronic communications through to leaflets that are available in the surgeries.

Process.

Volunteers with an interest in communications formed the project group and agreed a list of areas that should be examined and the terms of reference. To facilitate the work the project group broke into small sub groups with a specific area of communication to examine. They were asked to report back to the main project group with any recommendations they felt were required. These would then be compiled into a final report for submission to the PPG and the Practice for their consideration.

Terms of reference

The following were agreed:

This is an Ad Hoc special project group of the Charnwood Community Medical Group (CCMG) PPG.

The project group was created in order to consider and make suggestions on the various types of communication used by the CCMG. In particular the following:

- The Patients Guide to the Practice
- Waiting room screens
- Leaflets
- Social media
- PPG Newsletters
- Practice website
- Active signposting
- Dr's Letters

The sub group will liaise closely with Paul Hanlon Practice Business Manager, and may consult patients, Doctors and administration staff if deemed appropriate.

It will present a report to the CCMG PPG, with a view to making recommendations to the Practice with regard to possible actions.

Members are a self-selecting group of interested members of the CCMG PPG.

Meetings will be arranged at times convenient to the group. The sub group will agree a Chair.

The agenda for each meeting will be prepared in advance by the Chair and circulated to the sub group. The Chair will ensure that minutes are prepared after each meeting and a progress report will be made at the next CCMG PPG meeting.

A final report will be presented to the CCMG PPG prior to presenting to The Partners of CCMG.

Reviews, Suggestions and Outcomes.

The Patients Guide to the Practice.

The available printed booklet was reviewed and found to be very comprehensive. The same document is available on the Practice website. It was found that there was some duplication on the website which could cause confusion.

Recommendations.

• No changes were suggested for the printed version, but the duplication on the Practice website should be addressed to prevent further confusion.

Waiting room screens.

The group met to view the screens. All the slides were viewed and comments and suggestions were noted together with a list of the slides that were felt important to display and those that could be deleted. Some information is legally required to be displayed, some were out of date, some important but unreadable from a short distance away, or did not have contact details.

Suggestions and Outcomes

Agreement with the Practice was made on the following areas:

- The maximum number of slides and a minimum time each should be on the screen (ensuring the information could be read before the slide disappeared).
- A minimum size for the font for each slide.
- To create a standard slide master, with corporate colours, font, style and the inclusion of the Practice Logo. Also, the order the slides should display.
- Further work to include numbers for information slides which would match the numbers on the leaflets available in the waiting rooms.

Leaflets.

A member of the project group visited each surgery to consider the following points:

- How is written information (leaflets) presented?
- How up to date is it?
- Is it relevant?
- Are the leaflets clean or well-thumbed and dog-eared?
- Who tidies the leaflets up?
- Is the information clearly visible to patients when they come in?
- Can reception staff suggest more suitable sites for the leaflets?

Outwoods and Forest Edge Medical Centres.

The reception areas are bright with new light fittings. Noticeboards are available with information current and relevant, including PPG information. Leaflet racks are also provided.

Suggestions and Outcomes.

At Outwoods M.C. the leaflet rack is hidden from certain seating areas.
Consider relocating the leaflet rack to a position where it is more visible or a more prominent notice stating "Information Point". As both medical centres are awaiting refurbishment it was suggested that changes could be made to improve the display of literature as part of the work.

Rosebery Medical Centre.

Large library of information, including PPG literature available. There are no seats facing the library, although patients seated on the four blue seats to the left can see them. There is a selection of leaflets and magazines in a rack by each seating area. A member of staff is responsible for tidying, displaying new ones and removing out of date and damaged leaflets. All the information was current at the time of visit.

Suggestions and Outcomes.

- Provision of a small display area, perhaps could be used for urgent/immediate notices.
- A display board on the wall under the clock or on the red wall near the toilets and the green area. Provision of a more prominent notice stating "Information Point" to identify the current location.

Social Media.

Members with a keen interest in social media met to discuss the potential for its use by the Practice. They were to investigate the various types of media platforms available, how widely it is used in primary care and finally the associated problems and pitfalls of its use. It was identified that some local Practices have used social media in the past but have subsequently discontinued doing so. Only one local practice still uses it and it is run by the PPG. Whilst it was recognised that it is a good medium to get information out, it does require policing very carefully to prevent abuse entering the system. A group of 13 year olds when asked confirmed that they would use it if it was available. Social Media provides an exciting way to engage with patients and can prove a useful platform to communicate: Twitter is also a tool that provides opportunities for engagement.

Suggestions and Outcomes.

- The project group offered insight into different forms of social media with a focus on Twitter, and made suggestions to the practice.
- These were accepted and the Practice opened a Twitter page @GroupCharnwood.
- The Practice are already timely health related information from the NHS, Public Health England, West Leics CCG and Leicester Hospitals.

PPG Newsletters.

A review of the PPG newsletters was undertaken as it was not being widely accessed and may be in need of greater consistency of format. There is some repetition between the newsletters e.g. references in different newsletters to the various project groups and initiatives but they don't feel linked together i.e. there is not always reference to what has gone before. It was felt they could probably be more structured, more punchy and less wordy. It was also unknown how many people actually read it? How many hits on the website?

Suggestions and Outcomes.

- Clarify the target audience for the newsletter.
- Possibility of a more focussed and concise 'flyer' on the website and in the surgeries.
- There is an issue about practice news being included as a kind of attachment. There is a case for separating that out so he newsletter stands alone as PPG specific.
- A re-launch as a twice a year publication, one following the AGM, making reference to the annual report, and once in October/November. The content is generally appropriate but presentation could be tightened up and made more consistent as indicated above.

Practice website.

It was agreed the Practice website is an important resource for both the Practice and the PPG. It contains valuable information and an excellent form of communication, but only for those who are able to access it. A request was made to all members of the PPG to review the website and note their individual comments. These comments were then collated into a report which was considered by the PPG and the Practice Business Manager. In general the comments from members were mostly very positive commenting that the website was easy to navigate and was very responsive. It contained a lot of useful information and signposted patients to other services. The font and layout made it easily readable, and it was noticed that information was available through translation.

Suggestions and Outcomes.

Some suggestions were made as follows.

- The self-referral information, while very useful, might benefit from a short introductory paragraph indicating its meaning.
- Some of the links on the Home Page would benefit from a short explanation, and suggestions were made for adding others.
- Some information was identified as being dated including some on the PPG pages. The Patients Guide to your Practice section is duplicated elsewhere on the site. A review by a patient was recommended.
- As some home visits are now contracted to a private provider, should reference be made to this?

Active signposting.

Active Signposting can be defined as a process that provides patients with a first point of contact which directs them to the most appropriate source of help, when the GP isn't really the best person to see. We heard from the Practice with regard to the increasing number of patients requesting an appointment at the evening sit and wait clinic, and the fact that in a number of cases the patient could easily have been seen the next day or by another health care provider. The Practice was investigating a new telephone messaging system that would give information to patients whilst they were waiting for the call to be answered. The PPG agreed to work with them on the process

Suggestions and Outcomes.

- Once all of the messages were recorded, the PPG listened to them all and made a number of suggestions from a patient perspective about clarity and the order that some of the messages are played.
- It was agreed that the Practice would monitor the process and share feedback with the PPG.
- The Practice are keen to pursue Active Signposting in various options, it was agreed that the PPG would be consulted with at all stages of future development.

Dr's Letters.

The Practice use a number of standard practice letters which go out to patients. All of these letters have been reviewed by members of the PPG in the past and recommendations that were made were implemented. However, as we were looking at communications it was felt wise to undertake a review once again. All of the letters were examined looking for CLARITY (is it understandable/free of unnecessary medical terms/language?), for SIMPLICITY (does it stick to the objective and not confuse?), for SENSITIVITY (not make the reader unduly anxious/offended).

Suggestions and Outcomes.

- Most suggestions related to cosmetic issues i.e. making sure there is consistency in grammar, capitalisation etc.
- It was agreed to revisit this project area again at a future date.

Report Conclusion.

This project was undertaken by a large number of members of the PPG working in small groups on the identified areas. During the life of the project changes and improvements were made by the Practice based upon the recommendations made. Other recommendations are being considered by the Practice who continue to liaise with the PPG fully and openly. As a PPG it has given us an insight into ways that we can enhance and improve our profile especially how we engage with the patient population in the Practice.

We would like to thank the Practice for their support during this project, especially Mr Paul Hanlon, Practice Business Manager, who has had to attend a large number of meetings. The Practice is a very patient centred organisation who takes communication in all its forms as highly important. They have been throughout this project very open and transparent in all meetings that have taken place, always willing to listen and take on board our views and opinions. It is very pleasing to note that a large number of our recommendations were accepted without question and implemented. Those remaining continue to be considered.

This project has been a good example of the benefits of an active Patient Participation Group, working together with a Practice who recognise and accept the patient's voice as being important in improving the experience patients receive within primary care.