

Patient Participation Enhanced Service 2014/15 Annex D: Standard Reporting Template

London Region South London Area Team

Complete and return to: nhs.cb.lon-sth-pcc@nhs.net by no later than 31 March 2015

Practice Name: **QUEENS ROAD SURGERY**

Practice Code: **G85040**

Signed on behalf of practice: **Faithe Graham**

Date: 31.03.2015

Signed on behalf of PPG: **Joycelyn Graham**

Date: 31.03.2015

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

Does the Practice have a PPG? YES											
Method(s) of engagement with PPG: Face to face, Email, Other (please specify) Face to face, email and postal services											
Number of members of PPG: 28											
Detail the gender mix of practice population and PPG:					Detail of age mix of practice population and PPG:						
%	Male	Female	%	<16	17-24	25-34	35-44	45-54	55-64	65-74	> 75
Practice	50	50	Practice	18	11	22	15	14	9	5	4
PRG	26	65	PRG	0	0	2	1	6	9	7	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 traveller	Other white	White &black Caribbean	White &black African	White &Asian	Other mixed
Practice	625	41	0	435	44	25	5	27
PRG	8	0	0	2	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	37	27	13	56	93	774	464	33	1	2
PRG	1	0	0	0	0	1	13	2	0	0

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 PRG is promoted and advertised in the surgery on the PPG Noticeboard in reception, on the Jayex messaging board, verbally from receptionists and on the homepage of the surgery website. We send invitation letters 2-4weeks before the event. Patients are regularly encouraged to join the PRG to attend PPG meetings to 'have their say'.

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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?

YES- housebound patients, vulnerable groups

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

2 members of the PRG have volunteered their time to publish a PPG newsletter which will assist in attracting more patients to join the PRG, also inform and update other patients who are housebound and other vulnerable patients/residents. 1 member who is the chair of the Brayards Estate Tenants Residents Association will work with this committee regarding the involvement of the vulnerable/disabled patients/residents.

2. Review of patient feedback

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

Our sources of feedback are from comments left in our suggestion box in the surgery, Comments left on the NHS choices website, The annual GP survey and most recently the Friends and Family Test.

How frequently were these reviewed with the PRG? (3) three times a year

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Action plan priority areas and implementation

Priority area 1
Description of priority area: Improving access to Telephone – Patients were not satisfied with the time it takes for receptionists to pick up.
What actions <u>were</u> taken to address the priority? Feedback discussion with reception staff and in house training around dealing with receiving incoming calls timely and efficiently. The Regional Manager and Practice Manager have done mystery caller checks to monitor the access and Practice Manager regularly observes in the reception area and assisted in receiving calls as support. Headsets were purchased to allow staff better
Result of actions and impact on patients and carers (including how publicised): Significant improvement where calls are now answered within 1-5 rings. This is publicised on our waiting room notice board and Jayex board.

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Priority area 2

Description of priority area: **Appointment access/Telephone Triage**

What actions were taken to address the priority? Double appointments alerts have been removed from all patients tagged, except for 8wks baby checks. This has increase appointment availability. Telephone Triage was introduced due to the closure of the Lister Walk in Centre which has also doubled the patient contact daily from 16 face to face morning appointments to 33 Telephone Triage appointments. Patients that need to be seen on the day are booked by the doctor to come into Surgery or booked into the new access clinic IHL. The practice is piloting a new GP online advice service (webGP). This is advertised in the waiting room and Practice Website. Patients are able to request advice or online consultation and would be called back within 24hours.

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

- Increased patient daily contact
- Increase patient education on pharmacy self-help from the online advice service
- Telephone Triage has assisted with unnecessary Face to face appointments and accommodated patients whose work hours affect their access to help or advice.

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Priority area 3

Description of priority area: **Premises/Relocation**

What actions were taken to address the priority?

Since 06/2014 the Partners of the practice have had meetings with NHS England regarding relocating. Regular updates have been sought to confirm relocation and available premises.

Funding has been approved for relocation and renovation

Further communication will be sought in specifying location and proposed time for relocating

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

This is well by all, and await in anticipation for the long waited outcome.

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Progress on previous years

Is this the first year your practice has participated in this scheme?

NO

If you have participated in this scheme for more than one year, outline progress made on issues raised in the previous year(s):

- Majority of the repeat prescriptions are now done by Electronic prescribing (EPS2)
- More GP appointment capacity to meet increased list size.
- Admin staff has the opportunity to be trained to become a HCA/phlebotomist.
- Workstations with two screens to increase productivity and improve patient waiting time
- Headsets purchased for admin staff
- Staff completed the annual information Governance Training modules on Confidentiality and access to medical records
- Text messages are routinely sent to remind and invite for follow up appointments and for monitoring their conditions

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3. PPG Sign Off

Report signed off by PPG:

YES

Date of sign off: 31.03.2015

How has the practice engaged with the PPG:

How has the practice made efforts to engage with seldom heard groups in the practice population?

A confidential mailing list will be compiled to cover this group and engage them in the progress and activities in the practice

Has the practice received patient and carer feedback from a variety of sources?

Yes, this is through the Friends and Family questionnaire , suggestion box, PPG meetings, patient complaints and Patient Survey

Was the PPG involved in the agreement of priority areas and the resulting action plan?

Yes

How has the service offered to patients and carers improved as a result of the implementation of the action plan?

Patients have more access to their usual GP, by ways of telephone, online services, email on the day or within 24hours. They also can be seen in the access clinic at a more suitable time if they cannot be seen at the surgery.

Do you have any other comments about the PPG or practice in relation to this area of work?

No comments

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