

Patient Participation Enhanced Service 2016/17 Annex D: Standard Reporting Template

London Region North Central & East Area Team

Practice Name: Church Elm Lane Medical Practice

Practice Code: F82005

Signed on behalf of practice: Susan Ninan

Date: 31 March 2017

Signed on behalf of PPG: Virtual Group

Date: 29 March 2017

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: Email
Number of members of PPG: 132

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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	2314	29	1	766	32	111	15	118
PRG	30	1	0	20	0	0	0	5

	Asian/Asian British					Black/African/Caribbean/Black British			Other	
	Indian	Pakistani	Bangladeshi	Chinese	Other Asian	African	Caribbean	Other Black	Arab	Any other
Practice	102	52	138	31	54	1234	106	24	2	749
PRG	6	5	5	1	0	35	0	0	0	20

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:

No specific group is targeted; New patients are given information about the group and an application form in their registration packs when they first attend the practice. The group is also advertised on the practice website www.churchmelaneppractice.co.uk and application form can be completed online. Annually patient survey is carried out to collect feedback from patients coming to the practice. Annual report is published on the practice notice board and on the practice website.

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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?

NO

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

2. Review of patient feedback

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

An email was sent out to our PRG group with a link to the patient survey on Survey Monkey. The survey was also given out to patients who came in to see a GP/Nurse/HCA for their appointment during a 2 week period. Responses were collated and results of the survey published to the group.

Suggestion box in the reception area for patients to add any comments and suggestions.

Patient complaints and comments are reviewed and actioned in a timely manner – patients given the opportunity to discuss face-to-face their concerns with the GP concerned/Senior GP.

How frequently were these reviewed with the PRG?

Survey results are shared with the group annually.

Suggestion box in the reception area is available to patients daily and is checked on a monthly basis and necessary action is carried out.

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3. Action plan priority areas and implementation

Priority area 1
Description of priority area: Opening longer hours and providing extra clinics
<p>What actions <u>were</u> taken to address the priority?</p> <p>The practice has limitations to space in the building which restricts the number of rooms we have. In 2016 after the opening of the new minor surgery room which was NHS funded, we now have an extra room to operate from.</p> <ul style="list-style-type: none">- We have taken on Clinical Pharmacist under the new NHS scheme to place Pharmacists in Primary care. This has proved beneficial. Medication reviews when previously done by GPs, is now carried out by the Pharmacists which has taken the load from the GPs.- The Clinical Pharmacist also undertakes Asthma checks, COPD & Diabetic reviews- We have also hired a new Practice Nurse who undertakes increased hours to support our Senior Practice Nurse. <p>We are constantly looking at innovative ways to meet patient demands.</p>
<p>Result of actions and impact on patients and carers (including how publicised):</p> <p>We are currently looking to open 5 days per week – no longer having a half day on Thursday afternoons. In line with the rest of the week, we should stay open until 6.30pm. This will hopefully increase the number of appointments available and waiting times.</p>

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Priority area 2
Description of priority area: Increase number of patients using the online services
What actions <u>were</u> taken to address the priority? Patients are being made aware of the online services via Jayex board, Website and displaying banners, posters and materials in the waiting area and on reception regarding the service. We have also making patients aware by placing voice message at the start of our phone message when patients ring the surgery to reduce the number of phone calls we receive by letting patients know that they can book appointments, request medication and view their medical records like results online. Our repeat prescriptions patient communication section also has this message to let patients know. Those patients who request their access, we email them their pin details instead of asking them to come and collect it. This also increases the possibility of making their account live. We have also drafted a guide to registering to online system to make it easy for patients who struggle with registering online. This has reduced the number of queries.
Result of actions and impact on patients and carers (including how publicised): We have steadily increased the number of patients requesting for their online access from 9% to 12% in the span of 6 months.
Priority area 3
Description of priority area: Providing text messaging service
What actions <u>were</u> taken to address the priority? In 2016, NHS discontinued funding of providing text messaging service to the surgery which in turn resulted in the discontinuation

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of the service of reminding patients of their appointments. This saw a high DNA rate at the surgery which meant that we were not able to meet patient demands. The surgery has been more diligent with the DNA process by reaching out to patients who have a high DNA rate to remind them that text messaging service is no longer in use.

- We also put a notice up to patients on reception, posted the message on the jayex board and on the practice website alerting them of the recent development. We also encouraged reception to write down date and times of appointments when they walked in to make their appointment and also to remind patients on the phone so that they didn't forget.
- We have also looked at providers of text messaging service like iplato, mjog, Vodafone to reinstate this service since our patient survey highlighted that patients would like this service to remind them of their appointments.

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

We have voiced our need to the B&D CCG to look at providing funding. We hope that funding is provided to provide this service to our patients to reduce waste of NHS resources.

Progress on previous years

Update on action plan for 2015/16

Reduce waiting times to see the GP/Nurses – **Update** – The practice list size is steadily increasing. We have recruited a Nurse who is providing more number of appointments which reduces the waiting times to see the Nurse. GP appointments demand is steadily increasing. Practice is looking to recruit a new full time doctor which is an action for 2017/18.

To make patients more aware of our online services (via practice website – booking appointments and ordering repeat prescriptions) and additional services (family planning, sexual health screening, smoking clinic, NHS health checks, Diabetic/Asthma review, travel clinic etc) provided at the practice. **Update – Ongoing**. The practice is proactively displaying messages to direct patients to register for online services.

Missed appointments – **Update** – Practice has been proactive in identifying patients who regularly miss appointments by sending them DNA letters. After 3 letters, the Practice Manager tries and speak to the patient to access if the practice can help them reduce the number of DNAs and they are given another chance. Following this, if they DNA again, 30 days removal letter is sent to those who do not respond to find another local GP. This is ongoing and we have seen a reduction in the number of appointments.

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Update on action plan for 2014/15

- The practice has been granted funding for an additional consulting room. This work will be carried out in 2016 and an additional room will be available for the practice – **Update:** COMPLETED, we now have a new minor surgery room to facilitate minor surgery procedures and deliver this service to our patients
- Telephone system to direct calls specifically to the secretary to clarify progress regarding referrals, letters; prescription clerk for repeat prescription requests and 2 phone lines to manage appointments and other queries at reception; blood test result phone line available to patients during lunch hour, 1-2pm daily – **Update:** COMPLETED
- Length of waiting time to see the doctor continues to be a priority area from the recent survey. Patients are being made aware if there is more than 30 minutes waiting time before they are seen. If there is significant delay, patients are phoned in advance and asked to come a later time to avoid waiting around especially those with infants – **Update:** Ongoing
- Receptionists are proactively asking for a brief reason before booking an appointment so that they can ascertain if the patient requires more than one (10 minute) appointment or double appointment to discuss their problems with the GP – also letting the patient know that the GP will discuss one problem per appointment to avoid disappointment – **Update:** Ongoing through regular training for admin staff

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Report signed off by PPG: **YES**

Date of sign off: 29 March 2017

How has the practice engaged with the PPG?

The practice has engaged with the PPG via emails. We update the PPG every 6 months unless there is anything sooner to report or obtain agreement. Patients are made aware that they can contact the surgery at any time with any suggestions or questions. The Practice Manager is also available 4 out of 5 days per week to speak to patients regarding their concerns.

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

The practice has made efforts to engage with seldom heard groups with surveys, Friends & Family survey forms and a suggestion box near the reception area

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

Yes, via email survey and survey questionnaire handed out to patients

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

The PPG was sent the collated results via email. We do not have an active face-to-face group to discuss suggestions. We will look to raise awareness and make the group more active in the coming years.

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

The annual survey overall was very positive with the exception of number of appointments available and waiting time to see a GP. The reception/admin team particularly received very positive comments on the service they provide to the patients.

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

In 2017/18, we look to make the PRG more active to welcome suggestions on the ways we can further improve our service by raising awareness and inviting carers to participate in surveys and provide feedback.