

# Annex D: Standard Reporting Template

[Name] Area Team  
2014/15 Patient Participation Enhanced Service – Reporting Template

Practice Name: Richford Gate Medical Practice

Practice Code: E85016

Signed on behalf of practice: Renos Pittarides



Date: 18<sup>th</sup> March 2015

Signed on behalf of PPG:



Date: 18<sup>th</sup> March 2015

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

Does the Practice have a PPG? **YES**

Method of engagement with PPG: Face to face, Email, Other (please specify):

We have held a number of face to face meetings with our PPG, email consultations, face to face meeting with a local 'extra care' home, and a survey to known Carers. We are currently working with the local Learning Disability team to develop an app to gain feedback from patients with learning difficulties.

**Website** – the practice advertises the Patient Participation group on our website and encourages patients to join. Patients can also give feedback via the site and this is discussed by the PPG.

Number of members of PPG: We currently have 12 active members in our PPG

Detail the gender mix of practice population and PPG:

%	Male	Female
Practice	49%	51%
PRG	42%	58%

Detail of age mix of practice population and PPG:

%	<16	17-24	25-34	35-44	45-54	55-64	65-74	> 75
Practice	19%	9%	19%	18%	15%	9%	6%	5%
PRG	0%	8%	17%	9%	8%	25%	25%	8%

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	55%	5%	0%	12.5%	1.6%	0.80%	0.80%	0.70%
PRG	58%	8.3%	0%	8.3%	8.3%	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	2.2%	2.1%	0.6%	1.2%	1%	5.8%	8.7%	0.3%	0.4%	1.2%
PRG	0%	0%	0%	0%	0%	8.3%	8.3%	0%	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:

Our PPG has been established for a number of years and it was initially set up to be representative of our practice demographics at that time. We developed our group with our practice demographics in mind and aimed for the group to be representative of our practice population in terms of age, gender and ethnic background. As our practice demographics have changed over the years we have had to add to our group to make it remain as representative as possible.

Initially we targeted all patients to find people who were willing to commit to the PPG and who we felt from experience would be representative of a group of patients rather than just representative of themselves. As the group began to grow we realised that there were still some groups underrepresented and so we began to target these specific groups.

When our group consisted of more females than males we specifically targeted male patients when they attended the practice to encourage them to join our PPG and we explained the need for more men in our group.

We were also interested to involve parents with young children, as we felt that this group was under-represented. We have also displayed a number of posters around our practice advertising the PPG and the work they do but also informing patients we were underrepresented in certain groups. Members of staff have also approached patients we felt would be good for our PPG in terms of representation but also their enthusiasm and engagement with the practice. We have found the biggest obstacle in gaining membership is that patients are unable or unwilling to commit to regular meetings and therefore decide not to join the group. As a practice we have found it to be a balancing act of finding patients who will engage fully with the group and still ensuring the group is as representative as possible.

We have a large population of 0-16 year olds and we are looking at how we can gain representation from this group. A 15 year old has recently joined our PPG.

Please also see final paragraph following our patient AGM.

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/NO**

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

An analysis of our risk stratification data suggests that we have a considerable number of people at risk of an unplanned hospital admission. We have two members of our PPG who are in this category. For health reasons, they are not able to attend meetings but they do give feedback by email.

We have a number of carers registered at the practice and this particular group find it difficult to attend meetings. We have recently conducted a specific survey to this group to make sure that our systems are helpful to them. The results will be discussed at our next PPG meeting.

## 2. Review of patient feedback

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

- NHS Choices
- Formal Complaints
- National Patient Survey
- Friends & Family Test
- Comment Cards
- Text Messages

How frequently were these reviewed with the PRG?

We reviewed the above sources of feedback on a quarterly basis. Anonymous reports were generated by the practice and these were sent to the PPG and then discussed at the next meeting. We started the using the Friends and Family Test in November 2014. The PPG used the feedback reports to look for common trends of improvement needed so they could establish an action plan.

### 3. Action plan priority areas and implementation

Priority area 1
<p data-bbox="203 328 589 363">Description of priority area:</p> <p data-bbox="203 403 1133 438">Increase range of appointments bookable using the online facility:</p> <p data-bbox="203 478 537 513"><u>Online Blood Appointments</u></p> <p data-bbox="203 515 985 550">Investigation into possible offering of blood appointments online.</p>
<p data-bbox="203 699 889 734">What actions were taken to address the priority?</p> <p data-bbox="203 774 1211 809">Specific phlebotomy/blood clinics have been set up to enable patient to book online.</p>
<p data-bbox="203 957 1314 992">Result of actions and impact on patients and carers (including how publicised):</p> <p data-bbox="203 1032 2022 1099">Patients can now make appointments on line using their own System One personal login. This has been advertised our website and posters in the waiting room. We also produced a leaflet to inform patients of all online services. There are currently 1059 patients (10%) registered to use online services.</p>

## Priority area 2

Description of priority area:

### Extended hours

- To pilot a commuter clinic one evening a week.
- To pilot an early morning pre-booked telephone consultations clinic (7.00 - 8.00am) and
- To introduce a Saturday morning GP clinic.

What actions were taken to address the priority?

The following services have been implemented:

- An early Monday morning telephone consultation clinic was introduced between 7:00 & 8:00am
- A Wednesday evening commuter clinic has been implemented.
- Saturday morning GP & HCA clinics.

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

The practice is now offering extended hours as follows:

- Monday 7.00 – 8.00am Pre-bookable telephone consultations
- Wednesday 6.30 – 8.00pm Extended Hours GP Appointments
- Saturday 9.30 – 12.30 Health Care Assistant appointments
- Saturday 9.30 – 11.30 Pre-bookable GP appointments

These services are advertised on our website and in posters in the waiting room.

### Priority area 3

Description of priority area:

#### Appointment System

The group agreed that a gradual change of the balance between pre-bookable and on the day appointments should be introduced. This would allow for greater use of online booking facilities and also reducing peak times when patients are trying to make appointments. Alongside this change, staff should be trained to help patients navigate the service to ensure that GP time was not being used appropriately.

What actions were taken to address the priority?

The ratio of pre-bookable against same day appointments were increased to allow for more future bookings and the use of the online appointment booking service.

Where possible, 2.00pm afternoon clinics have been introduced to help deal with afternoon demand.

We are actively working with Hammersmith & Fulham GP Federation to develop training for our reception staff (particularly focusing on helping patients to access appropriate services as alternatives to GP appointments).

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

An appointment audit was conducted by the practice looking at our ration of pre-bookable and same day appointments. This data was analysed against data taken from the appointment system of a larger practice in the Hammersmith & Fulham locality. We established that an increase in out pre-bookable appointments was needed to manage our demand more efficiently. The results of the audit were advertised on the practice website.

Progress on previous years

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

## **2011/12**

### Improving access to GPs by telephone

Feedback suggests patients having difficulty speaking to doctors due to limited call times. The proposal is that the practice reviews call times and offers greater flexibility.

**Progress:** System was changed to give greater flexibility for patients to speak to their doctors.

**Status:** Completed

## **2011/12 & 2012/13**

### Online booking facility

In response to patient's feedback about difficulty in making appointment it is proposed that the practice invest in an on-line booking facility.

**Progress:** The online booking facility has been fully implemented in our practice. Invitations to register for online services have been sent out with all outgoing correspondence over a 6 month period. Posters have been displayed around the surgery to encourage patients to make use of our online services.

**Status:** Completed

### Improving disabled access to building

Comments from patients concerning difficulty opening front door (on-going issue from previous years). Proposed that both main entrances are automated. Explore use of 'tactile indicators'

**Progress:** The front doors have been automated and we are working with Central London Community Health Care NHS Trust to make a bid to NHS England for monies to improve disability access.

**Status:** Completed

### Commuter Clinic

Numerous patient comments about lack of appointments for working people. Proposal is that practice develops a commuter clinic.

**Progress:** Commuter clinics are run weekly on a Wednesday between 17:00 – 20:00. We have also recently begun a new Saturday morning service in response to more recent feedback from the PPG. In addition there is a Family Planning Clinic providing appointments in the evenings and at weekends.

**Status:** Completed

### Greater use of text messaging

Number of favourable comments about the text reminder system. PPG and practice to consider use of text messaging for other matters.

**Progress:** The implementation of a new clinical system, SystmOne has enabled us to increase our text messaging service to include health promotion i.e. smoking & alcohol advice and promotion of our services such as the NHS Health Check.

**Status:** Completed

## **2012/13**

### Repeat prescriptions

PPG took up comment re the need for a repeat prescriptions box. Suggested that it is sited at a place where patients can access anytime during the day.

**Progress:** We have created a repeat prescription box which enables patients to drop off their repeat prescription requests. It eliminates the need for queueing and therefore makes for a quicker more efficient service.

**Status:** Completed

### Appointments

Noted feedback about patients being kept waiting for long periods before being seen for their appointment. Agreed that practice will conduct detailed audit of appointment system and discuss with individual doctors how they might adapt their appointment times to reduce waiting.

**Progress:** Catch up slots created in all clinic set ups to allow for clinicians running late. This has been successfully implemented.

**Status:** Completed

### Care of the elderly clinic

PPG discussed possibility of elderly patients attending day time clinic as an aid to helping them with the appointment system and providing the GPs with time for care planning.

**Progress:** Care planning clinics set up this year for at risk patients including the elderly. 20 min appointments set up for these clinics rather than 10 mins and patients were booked with their named GP for consistency of care.

**Status:** Completed

## **2013/14**

### Upgrade Waiting Room Furniture

As a result of various comments about the waiting room it is proposed that following present redecoration of waiting room furniture is replaced to include chairs with arms

**Progress:** All waiting room chairs have been replaced in line with infection control standards.

**Status:** Completed

### Telephone appointments for patients with hearing difficulties

All patients on the register to have access to GP telephone appointments. Comments made by members of the PRG.

**Progress:** Letters sent to all patients on register to inform them of access to telephone appointments.

**Status:** Completed

Update information about online repeat prescription service

Comments received from members on the PRG about experience of using web site. Proposal to make repeat prescription ordering process clearer and discuss with PCT reinstatement of patients being able to collect from named pharmacies.

**Progress:** A change of clinical system allowed for a clearer process for ordering prescriptions on line. Patient user guides have been created and help provided on site for any patient requiring a demonstration. The introduction of EPS in our practice has enable patients to pick a designated pharmacy to send their prescriptions to.

**Status:** Completed

Customer Care training

Varying feedback about reception staff ranging from very positive to poor experience. Practice agreed to make sure each member of staff receives appropriate customer care training.

**Progress:** The practice has employed 2 new receptionists. The practice is working closely with Hammersmith & Fulham Federation to provide customer care training for all our receptionists.

**Status:** On-going

PPG Sign Off

Report signed off by PPG: **YES/NO**

Date of sign off:

How has the practice engaged with the PPG:

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

We have made efforts to engage with carers by engaging them through a specific questionnaire. Members of the practice team held a meeting with staff at Elgin Close (an Extra Care Home in the practice boundary) to discuss ways of improving services to the residents.

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

Yes we have received feedback from a variety of sources and have reviewed them on a quarterly basis.

The variety of sources include:

- NHS Choices
- Formal Complaints
- National Patient Survey
- Friends & Family Test
- Comment Cards
- Text Messages

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

Yes the PPG were actively involved in the agreement of priority areas and the resulting action plan. The practice has regularly updated the PPG on the action plan and its progress.

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

The appointment system has become more flexible and a larger number of pre-bookable appointments are available for all patients. The implementation of the new online services gives patients more access to appointments, repeat prescription requesting and viewing their summary care record.

New furniture in the practice has improved the look and feeling of the waiting area. Patients seem pleased with the changes and many have commented that they prefer the new chairs.

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

The practice has made every effort to engage with the PPG in a flexible manner to suit all PPG members. For example, where someone prefers to be contacted via telephone we will make effort to do so.

The practice held a practice AGM on Monday 16<sup>th</sup> March. This was advertised on the practice website, in the waiting room and by text message. Members of the practice team and the PPG gave presentations, took questions from the floor and gave out signup sheets to recruit more patients to the PPG. As a result 16 out of the 28 who attended expressed an interest in joining the PPG. This has resulted in greater representation as we now have a male carer, a teenager and two Asian patients (all of which were underrepresented).

