

Annex D: Standard Reporting Template

London Region [North Central & East/North West/South London] Area Team
2014/15 Patient Participation Enhanced Service – Reporting Template

Practice Name: Hurley Clinic

Practice Code: G85053

Signed on behalf of practice: *Paul Elliott (Practice Manager)*

Date: 25/3/15

Signed on behalf of PPG: *Isabelle Barnes (Chair)*

Date: 25/3/15

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): Method(s) of engagement with PPG: Face to face, Email, Other (please specify): Face to Face through bi-monthly meetings with the PPG Steering Group. Meetings held in the practice with PPG members with formal agendas, and minutes on: 8/5/14; 10/7/14; 11/9/14; 6/11/14; 11/2/15 plus Annual General Meeting (public meeting for all patients with PPG members) on 20/11/14 and a Public meeting where patients were invited to meet with the GP Partners, PPG members and staff on 25/9/14 to discuss its development

Number of members of PPG: All registered patients are automatically members of the PPG; there can be up to 12 members of the Steering Committee but currently there are 5 active ones

Detail the gender mix of practice population and PPG:

%	Male	Female
Practice	51.96	48.04
PRG	20%	80%

Detail of age mix of practice population and PPG:

%	<16	17-24	25-34	35-44	45-54	55-64	65-74	> 75
Practice	16.3	10.06	22.79	17.51	15.74	8.48%	5.02%	4.07
PRG	2%	%	%	%	%	20%	40%	40%

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	17%	4%	2%	18%	1%	3%	3%	7%
PRG	3							

	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%	3%	5%	15%	6%	3%	2%	5		
PRG				1		1						

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 PPG holds events throughout the year publicised to the wider patient population. Educational events at the practice, or a local community

venue, enable patients from a wide range of ethnic backgrounds to attend, and engage with the PPG membership. In addition, each year, the PPG holds an annual general meeting to review the performance of the practice and evaluate this from the patient perspective. At both types of event, registers of attendees are kept and will be contacted about getting involved in the PPG. Also, the practice advertises the existence of the group via posters and on screen waiting room information. Patients are encouraged to ask at reception for further details, and leave their contact information so that we can write to them to invite them to upcoming meetings. There is also an admin liaison member of staff in reception who patients can contact and speak with on the issue of the PPG and any questions that they may have about joining.

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:

- a. Patient Survey – conducted in September 2014 – The survey availability was sent out by text, and hard copies were in reception for them to complete. It was promoted by staff and PPG members within the practice waiting area. This year saw a record number of patients completing the survey (565 as compared with 450 from the previous year). From the responses, members of the PPG analysed the results as a group and provided a written report to the PPG AGM on the findings.
- b. Annual General Meeting for the Patient Participation Group – all patients were contacted via letter and text to invite them to attend a meeting in the local library (very near the practice). The meeting was attended by members of the PPG, GPs and Managers at the surgery and provided opportunities for a question and answer session on various aspects of the service. It provided a platform from which we could hear the patient experience first-hand, respond to their concerns, and formulate list of action points on what they would like the practice to review in terms of its service and improving how it performs.
- c. General Public meeting – held with GP Partners where patients were invited to a question and answer session, and this was organised by the PPG who also participated in the event.

Both forms of feedback have been very helpful in making decisions on how patients would like to see our service run, and following deliberations by the PPG, this formed the basis of the improvement actions points for this year.

- d. The PPG have also successfully organised three educational events for the patient population throughout 2014/15. An event in October 2014 on the management of diabetes, plus two *warm and well* events – in collaboration with a number of speakers – such as AGE UK, on keeping warm and healthy for older patients. These events were held in February and March 2015.

How frequently were these reviewed with the PRG? The results of the patient survey reviewed at subsequent steering group meeting on 6th November 2014, and at the AGM on 20th November 2014. Educational events, and feedback from them are reviewed at subsequent steering group meetings.

3. Action plan priority areas and implementation

Priority area 1

Description of priority area:

Continuity of care

What actions were taken to address the priority?

Priority Area	Actions	Who does this?	Deadline
<p>Look at ways of ensuring continuity of care – multiple assigned GPs where appropriate</p>	<p>As the practice also has a high number of locum GPs. Encourage locums to have regular sessions which helps with continuity of care as the locums often follow up patients and attend clinical decision making meetings where follow up care is discussed</p> <p>Salaried GPs assigned to patients aged 75 and over.</p> <p>Participation in the unplanned admissions enhanced service, which ensures a named GP and care plan are completed for the most vulnerable of our patients who are at risk of hospital admission.</p>	<p>Lead GPs and Practice Manager, facilitated through clinical meetings with the team</p>	<p>31/3/2015</p>

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Result of actions and impact on patients and carers (including how publicised):
This information will be publicised on our website outlining our areas of improvement and what actions have been taken. We will measure the impact on patients of greater continuity of care, and of the opportunities for our clinical team to discuss and engage with that the progress of individual patients at clinical meetings. This should ensure we have the best outcome for both patient and their carer in their ongoing clinical management.

Priority area 2

Description of priority area:

Telephone Access

What actions were taken to address the priority?

<i>Priority Area</i>	<i>Actions</i>	<i>Who does this?</i>	<i>Deadline</i>
<p>Improving telephone access for patients</p>	<p>As part of the named GP for patients over 75 initiative, we ensure that there is a bypass line to enable other health professionals (such as secondary care doctors or consultants) to quickly get in touch with us if they want to discuss that patient's care. We have ensured that the telephone line is configured so that a team of staff can respond to calls.</p> <p>Undertaking an exercise to audit incoming calls and response rates throughout the day. Within the last few months we have been trying to address response rates by revising call handling resources in our reception team. This is still work in progress and will continue throughout the year.</p>	<p>Lead GPs and PM</p> <p>PM</p>	<p>1/1/2015</p> <p>July 2015</p>

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

We are continuing to monitor the response rates to calls into the practice to ensure that there are sufficient call handling resources at peak times. This will allow patients and carers to access the surgery via phone with shortened wait times on calls. We have already been able to adjust our existing system in response to the success of our telephone emergency triage system, where patients can call in and request a telephone triage appointment or call back from GPs for emergency treatment. The bypass line for health professionals to get in touch about specific patients has been a necessary but effective addition to our being able to be responsive and effective in patient care.

Priority area 3

Description of priority area:

Staff training

What actions were taken to address the priority?

<i>Priority Area</i>	<i>Actions</i>	<i>Who does this?</i>	<i>Deadline</i>
<p>Support and training for reception staff</p>	<p>We have been working with our reception team to ensure that regular staff support and training meetings take place. One of the key areas of the training was to ensure that there are good communication mechanisms between the reception staff as well as the clinical team. All areas where improvements needed to be made were discussed and group training sessions, incident and complaint reviews were held throughout the year.</p> <p>Another key area was to address the recruitment of permanent staff to ensure continuity. This we have done and will put in place a recruitment strategy to ensure this is maintained. Our 2014 patient survey shows a drop in complaints in this area and this has continued through the rest of 2014/15.</p>	<p>Practice Manager</p>	<p>Started July 2014, ongoing through until 2015/16 to ensure permanent systems are maintained</p>

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

We have found that regular support and training meetings have improved the performance of the team and their morale overall, leading them to work very effectively and efficiently as a team. We will want to continue this work in 2015/16

We have listened to our patients' concerns about issues with reception and ensured that their comments are taken on board. We have ensured that staff are trained to be both respectful and sensitive of their needs as patients and/or carers, and this is often in very challenging and stressful situations. Staff training is a regular part of staff development so we will continue to look at ways of improving the patient engagement and experience of our reception team. Details of this action area will be publicised in the report on the improvement areas as set out here.

The number of complaints in this area have dramatically reduced.

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):

Priority Area	What action has been taken?	Who is responsible for this?	What action still needs to be taken?	Deadline
<p>Access to appointments – improving wait times</p>	<p>We had an average wait time of 2 weeks for routine appointments, but since early in 2014/15 this has been reduced to an average of one week (5 working days) to a see a GP or a Nurse. In the last 18 months, the introduction of a GP emergency triage system has helped to reduced wait times for routine matters. We are currently completing an audit and review of the existing system to ensure it remains responsive to our patients' needs.</p>	<p>Practice Manager</p>	<p>Review and audit appointment system to ensure it meets demand</p>	<p>June 2015</p>

4. PPG Sign Off

Report signed off by PPG: YES

Date of sign off: 25/3/15

How has the practice engaged with the PPG:

How has the practice made efforts to engage with seldom heard groups in the practice population? The PPG held public open meetings in September and November 2014. The PPG has 2 representatives on the Lambeth PPG Network and members of the steering committee have attended meetings regularly; our PPG chair is a member of the Network Steering Committee.

Has the practice received patient and carer feedback from a variety of sources? The practice receives patient and carer feedback through the patient survey (annual survey completed in Sept 2014 with 565 responses), from the public meetings held in throughout the year and the educational health promotion events (3 in total) which were organised by the PPG with help from practice staff. In addition, the practice receives feedback to which it always responds, from the NHS Choices website.

Was the PPG involved in the agreement of priority areas and the resulting action plan? Yes, the PPG was involved in the agreement of priority areas and action plan. This was discussed and minuted at the PPG steering meeting.

How has the service offered to patients and carers improved as a result of the implementation of the action plan? The current action plan has resulted in improve patient experience with regard to the engagement with our reception team. The responses to the 2013 patient survey led us to change the telephone access system and improve continuity of care; we are still working on both areas as the 2014 survey showed that there was still room for improvement.

Do you have any other comments about the PPG or practice in relation to this area of work? We have a very strong, dedicated PPG whose work in this practice has been commended by the recent CQC inspection as outstanding. They take the lead in

ensuring we hold regular meetings with them, and were pivotal in helping with getting responses from patients on this year's patient survey. We hope to continue to build on our joint partnership of helping to shape the future of this practice.