

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

London Region North West Area Team

Complete and return to: england.lon-nw-claims@nhs.net by no later than 31 March 2015

Practice Name: STAG LANE MEDICAL CENTRE

Practice Code: E84078

Signed on behalf of practice:

Date: March 2015

Signed on behalf of PPG:

Date: 4th March 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)																																					
Opportunistic Face to face, Word of mouth, Poster display on notice board in the practice reception, Practice Newsletter, Practice Website and each patient representative group (PRG) meetings, email of meeting minutes etc																																					
Number of members of PPG: 14																																					
Detail the gender mix of practice population and PPG:	Detail of age mix of practice population and PPG:																																				
<table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 20%;">%</th> <th style="width: 40%;">Male</th> <th style="width: 40%;">Female</th> </tr> </thead> <tbody> <tr> <td>Practice</td> <td>1664</td> <td>1619</td> </tr> <tr> <td>PRG</td> <td>12</td> <td>2</td> </tr> </tbody> </table>	%	Male	Female	Practice	1664	1619	PRG	12	2	<table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 10%;">%</th> <th style="width: 10%;"><16</th> <th style="width: 10%;">17-24</th> <th style="width: 10%;">25-34</th> <th style="width: 10%;">35-44</th> <th style="width: 10%;">45-54</th> <th style="width: 10%;">55-64</th> <th style="width: 10%;">65-74</th> <th style="width: 10%;">> 75</th> </tr> </thead> <tbody> <tr> <td>Practice</td> <td>611</td> <td>320</td> <td>682</td> <td>457</td> <td>400</td> <td>405</td> <td>217</td> <td>225</td> </tr> <tr> <td>PRG</td> <td>0</td> <td>0</td> <td>0</td> <td>2</td> <td>2</td> <td>5</td> <td>2</td> <td>3</td> </tr> </tbody> </table>	%	<16	17-24	25-34	35-44	45-54	55-64	65-74	> 75	Practice	611	320	682	457	400	405	217	225	PRG	0	0	0	2	2	5	2	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	148	62	11	447	18	6	8	23
PRG	2	0	0	0	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	1822	99	9	17	219	125	78	23	37	136
PRG	10	0	0	0	0	0	2	0	0	0

Describe steps taken to ensure that the PRG is representative of the practice population in terms of gender, age and ethnic background and other members of the practice population:

The composition of the PRG reflects the overall patients registered with the practice; however, a few more young members, more females and members from Eastern European descent may be desirable who could give a different perspective and viewpoints to PRG.

Steps taken by the Practice to engage

1. For many months on website, word of mouth, each patient representative group (PRG) meeting, notice board in reception, face to face, the Practice Manager (PM) and Dr Shah have advertised the PRG and recruited new members.
2. In the last 12 months some members retired and new members have joined.
3. The practice has tried to have evening meetings to ensure patients who work can attend.
4. Also, attempts have been made to recruit younger patients with children.
5. One disabled patient who is also a parent of a young child has joined and is an active member.
6. We have some carers, professionals, retired, employed people on the group.
7. Have made several attempts to get more women on the group especially from Asian community but had no response.

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The Stag Lane Medical Centre PRG group has been established for over 4 years. We had at least 5 meetings in 2014 -15.
PRG meetings dates for 2014-15:

- 23 Feb 2015
- 19 Jan 2015
- 13 Nov 2014
- 14 August 2014
- 29 May 2014

At January 2015 meeting, Consultation for a practice merger and views of the PRG members were sought regarding the merger of the Stag Lane Medical Centre and Primary Care Medical Centre.

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?

All patient groups within the practice population

- the nursing home patients or their carers are represented within the PRG
- young mothers
- patients from other White ethnic group (Eastern European) and relatively new additions to the practice

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

1. Dr U Shah does a regular ward round at the local nursing home and meets the families and carers there.
2. We have advertised on the website, notice board and by word of mouth to engage this group. We have 2 young fathers on the group.
3. The Eastern European patients have been more transient and we are hopeful for more engagement with this group by the appointment of a staff from this ethnic group.

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2. Review of patient feedback

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

- Verbal patients views and suggestions
- Views and suggestions via practice post box suggestions
- Friends and Family Test responses
- Patients letters regarding priorities and issues received are all read by the Practice Manager (PM) and Dr Shah
- Complaints/compliments discussed and themes at all clinical and administrative meetings
- In House Patient Survey re merger etc
- Mori Poll – results discussed at all clinical, administrative and PRG meetings

How frequently were these reviewed with the PRG?

- At every PRG meeting and opportunistically as well
- We have a volunteer working within the practice 5 days a week from the PRG and is available for comments for any arising issues

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3. Action plan priority areas and implementation

Priority area 1
<p>Description of priority area:</p> <p>The main patient and carer priorities and issues, practice planned service change regarding GP access and with the planned practice changes at 1.4.15, the following action was identified as priority area:</p>
<p>Continuity of Care for patients</p>
<p>What actions <u>were</u> taken to address the priority?</p> <ul style="list-style-type: none">• Daily phone access to a GP with new appointment system - GP to speak to all callers requesting an appointment and to prioritise appointments, triage, signpost patients to other healthcare professionals/services, explain how to obtain repeat prescriptions without the need to see the GP• Recruitment of additional clinicians• Dr Upma to take calls at SLMC regularly and see her own patients as appropriate. Same with Dr Ajit at PCMC.• Regular sessional GPs to be available.• Merger may provide more regular GPs for all patients• More nurse appointments as at SLMC
<p>Result of actions and impact on patients and carers (including how publicised):</p> <ol style="list-style-type: none">1. Greater patient satisfaction2. Improved outcomes for patients i.e. reducing A & E admissions and outpatients admissions3. Greater Doctor satisfaction

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Priority area 2
<p>Description of priority area:</p> <p>The main patient and carer priorities and issues, practice planned service change regarding GP access and with the planned practice changes at 1.4.15, the following action was identified as priority area: Communications with patients.</p>
<p>What actions <u>were</u> taken to address the priority?</p> <ul style="list-style-type: none">• Use email/SMS where appropriate• Use of SMS messages to inform patients of their blood test results.• SMS messages to send patient reminders regarding their booked appointments with a GP or a nurse or a Phlebotomist.• Practice poster display regarding meetings and consultation.• Practice newsletters to inform patients regarding issues e.g. ebola outbreak, patient access and practice merger.• Regular combined newsletter for both practices• Make this available on website, in practice and at local pharmacies• Consider mail shot to patients once or twice a year when important changes occur like merger, move premises
<p>Result of actions and impact on patients and carers (including how publicised):</p> <ol style="list-style-type: none">1. Better informed patients2. More engaged patients3. Better use of practice services by the patients

Priority area 3

Description of priority area:

The main patient and carer priorities and issues, practice planned service change regarding GP access and with the planned practice changes at 1.4.15, the following action was identified as priority area:

Premises Improvement.

As there is a planned practice merger with the Primary Care Medical Centre, part of the existing Buddy group, this has been agreed as a priority area.

What actions were taken to address the priority?

Efforts in terms of communications and face to face meetings have been done with Brent CCG, NHS England and Propco to agree the use of the vacant rooms at the Stag Lane Medical Centre. Business cases have been submitted to secure funding from NHSE regarding practice premises development

- PCMC has planned extension work to ground floor
- Stag Lane has applied to refurbish and rebuild areas in two wings to improve the premises for patient use for registered patients, local network patients and patient education/support services

Premises improvement at Stag Lane Medical Centre is dependent on Funding from NHSE.

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

- Better patient care in fit for purpose premises
- Better patient experience
- Better staff experience
- Improved staff recruitment and retention

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):

- The practice has an established PRG and has regular PRG meetings
- Increased phlebotomy sessions hosted at Stag Lane Medical Centre after actions by PRG
- In house phlebotomy service has been developed by practice
- Patient Self check screen for reception in place.
- Telephone access improved by use of mobile phones to call out hence freeing in coming lines.
- Increased administration staff hours to help waiting times
- Increased staff training to help improve access and customer care
- Walk in service introduced in Sept 2011 and is now superseded with GP telephone access
- More nursing hours to increase access with employment of two practice nurses
- Regular GP locums in the practice with choice of male and female GPs.
- Enhanced services offered.
- Electronic Prescribing introduced for patients.
 - Promoted EMIS ACCESS to order prescriptions and also book appointments.
 - This has improved patients' experiences and reduced inconvenience.
 - Electronic prescription service (EPS) has been heavily promoted as this is ongoing.
 - All staff trained and continual training for new staff in the use of this service.
 - We have provided ON LINE ACCESS for a number of years and the government is now making this an enhanced service for GP practices. Our patients have on the whole had a very positive experience of EPS.
- Dr Shah has reviewed length of her appointments to ensure on the day appointments available daily.
- Optimise use of local HUB
- Performance Review at annual appraisal for staff
- In house customer training update
- Patient feedback on individual performance as a Motivational pilot
- Evening booked telephone consultations for doctors and nurses

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4. PPG Sign Off

Report signed off by PPG:

YES

Date of sign off: 5.3.2015

How has the practice engaged with the PPG:

How has the practice made efforts to engage with seldom heard groups in the practice population? YES – Every effort has been made opportunistically when patients and carers make positive or negative, verbal or written comments about the service to enlist them on to the PPG. We have attempted to engage younger patients and parents especially mothers currently unsuccessfully we have members who are carers, have long term conditions and are disabled.

Has the practice received patient and carer feedback from a variety of sources? YES- See above

Was the PPG involved in the agreement of priority areas and the resulting action plan? YES – Every year we engage the PPG in identifying areas for improvements. Last year's achievement is as follows:

2013-2014 action plan achieved:

Actions	When by	What resources will be needed	Achievement
Waiting times when attending appointments needs to be improved. This will directly reflect on patients feeling they can see the doctor quickly and easily	1 st August 2014	<ul style="list-style-type: none"> • Dr Shah to review length of her appointments. • Ensure on the day appointments available daily. • Optimise use of local HUB 	<ul style="list-style-type: none"> • Through the year US had 15 minute and 10 minute appointments • On the day appointments available until 24.2.2015 • Hub used for urgent patients that could not wait for next appointment i.e. 71 patients between 1.4.2015 to end of Feb 2015 seen at the Hub,

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<p>Reception staff needs to be more helpful. Customer Care training can be helpful</p>	<p>1 May 2014</p>	<ul style="list-style-type: none"> • Performance Review at annual appraisal • In house customer training update • Patient feedback on individual performance as a Motivational pilot 	<ul style="list-style-type: none"> • All staff except one had appraisal • Dr Shah trained staff from both surgeries on customer service on Wednesday 14.1.2015 • All staff to view the FFT feedback which is generally positive about staff
<p>Introduction of evening phone consultations with clinicians</p>	<p>1 April 2014</p>	<ul style="list-style-type: none"> • Evening booked consultations for doctors and nurses 	<ul style="list-style-type: none"> • This has been available over the last 12 months and now daily afternoon calls are also taken to discuss appointments etc with patients

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

Through the year phone access for all care planned patients has been available with Dr U Shah and with Nurse Indu Gudka. Longer appointments have been available with Dr U Shah through the year. Staff training has also been under taken in customer care with positive feedback on FFT although NHS Choices comments remain challenging.

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

Through various changes the practice has faced the PPG remains an important resource and method of communications and as well as dialogue with users of the service.

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