

Patient Participation Enhanced Service 2014/15 Annex D: (PPG Survey Report 2014/15)

London Region North Central & East Area Team
Complete and return to: england.lon-ne-claims@nhs.net no later than 31 March 2015

Practice Name: **Abbey Road Medical Practice**

Practice Code: **F84111**

Signed on behalf of practice: **Mrs Ghazala Jarwar (Practice Manager)**

Date: **5 March 2015**

Signed on behalf of PPG: R Kaushik

Date: 10.03.2015

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) Our Patient Participation Group (PPG), has been selected to represent the diverse practice population. We used every patient contact as an opportunity to encourage patient's involvement including displaying poster in the waiting area and face to face meetings.
Number of members of PPG: 09

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<p>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:</p> <p>We also encouraged patients at the front desk to participate in the patient forum. Our aim was to target patients from all age and ethnic groups; however the response was not very positive due to work and other commitments, mainly from the younger generation, people who work and parents of young children.</p> <p>In previous years we managed to get a good mix of people for our group, this has changed in the last couple of years as patients come and gone. We tried our level best to get a mixed group of patients but it was very difficult to find patients that fit all the criteria for the PPG.</p>																																																							

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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:

Annual Practice survey, Patient Complaints review and comments and suggestions from patients and from NHS choice website.

How frequently were these reviewed with the PRG?

Once a year.

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3. Action plan priority areas and implementation

Priority area 1
<p>Description of priority area:</p> <p><u>Routine pre booked appointment:</u></p> <p>Our group has found from our survey report that this year routine pre bookable appointments was an area which needs improvement as patients found it is very difficult to book follow up appointments. The group members have also highlighted that it is difficult to book an appointment at a required time or specific week.</p>
<p>What actions <u>were</u> taken to address the priority?</p> <ul style="list-style-type: none">• <u>48 hour appointment</u> – we have developed a system where we put an extra session on every 48 hours to give patients the access to be able to book an appointment within a couple of days.• <u>Weekly appointments</u> – We have a GP register whose appointment list is updated a week in advance, giving patients the availability of booking appointments within a weeks' time.• <u>Patient on line access</u> – We have also offered patients on line access to be able to book appointments. Everyday 4 slots for each GP are available for on line booking. Patients can book up to 4 weeks in advance.• <u>Abnormal results</u> - We did our audit and found that every day an average of 15-20 patients were calling to get their test results. For any normal results our HCA has been trained to give them results, and for abnormal results we have created 2 extra 5 minute slots for each doctor (morning and evening sessions).

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- Addressing DNA's – We noticed that patients who have follow up and pre booked appointments booked for 3-4 weeks' time, if they feel better and do not require the appointment than they do not turn up without cancelling. We have started sending out DNA letters on a daily basis to patients who do not turn up for booked and emergency appointments, reminding them of the importance of cancelling if an appointment is not required.
- Addressing frequent flyers – We have started developing a list of our frequent flyers who on a daily basis are booking appointments. Practice manager has started calling these patients in for a meeting to discuss where the practice or clinicians are failing to address their clinical needs and what practice can do to avoid them having to make frequent appointments. In these meetings the practice manager addresses the best way to use practice appointment system, for example for results – a telephone consultation is to be booked, referral queries and letters are dealt with by admin staff. For smears, ear syringing, travel vaccinations and childhood immunisations are done by the practice nurse.

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

Appointments have been improved to a certain extent and still working on our DNA's and also encouraging patients to cancel appointments on time so we can offer to another patient. This seems to be happening now. Having the 48 hours and weekly appointments has given our patients the option to get appointments earlier rather than waiting for routine pre booked appointments.

All staff is aware that these appointments are to be offered preferably to those who do not require an emergency appointment however; they need to see GP sooner and cannot wait for 3-4 weeks to get an appointment.

The information is available on our practice leaflet, Jayex box and notices in the waiting area and 'NHS choice' website.

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Priority area 2

Description of priority area:

Waiting time:

The group have found from the survey report that patients have complained about waiting times when they come for an appointment and they have to wait a long time before the doctor calls them.

What actions were taken to address the priority?

- Practice manager did the audit for waiting times for each doctor and had a meeting with them. One doctor has voluntarily agreed to start clinic half an hour early and asked rota manager to block a slot after 5 booked slots, in this way she is able to keep to time. All doctors have been reminded to keep on time.
- Reception staff has been asked to keep patients informed at regular intervals if doctors are running late.
- Doctors have been asked to apologise to patients when they think that they are running late.
- Notices have been put in the waiting area that patients should stick to 1-2 problems per appointment.
- Practice manager has decided to do 3 monthly audits to monitor waiting times.
- For emergency appointments reception staff have been trained to inform patients that they may have to wait, notices have been displayed in the waiting and reception area.

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

It looks like regular audits and monitoring of the waiting times is working and the recent audit shows a significant improvement in waiting times.

Recently we have not had any complaints regarding waiting times, however we have decided to keep monitoring our waiting times.

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Priority area 3

Description of priority area:

Behaviour and attitude of admin staff:

In our survey report it has been highlighted that our reception staff needs further training to improve in their customer service skills.

What actions were taken to address the priority?

Our staff is well trained and we have a system that on a weekly basis (Thursday after 1pm) we have a reception staff meeting to discuss patients feedback. Recently we have provided them a customer service and telephone answering training which has been offered by CCG.

When staff join us we provide them with proper induction and anyone who is new to customer services and has not worked as a receptionist we also offer them NVQ level customer service training.

Our PPG members have decided to come as a 'mystery shopper' and sit in the waiting area to observe the performance of the reception staff.

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

Reception staffs customer service skills are improving and some patients have provided very positive feedback.

We have a comments and suggestion box in our reception area and patients are encouraged to give their feedback, and if patients are unhappy about an individual member of staff they can complain to the practice manager. This has been publicised via notices and Jayex box in the waiting area and on our practice leaflet.

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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):

- Telephone answering has improved since last year, 2 extra receptionists have been appointed for the evening.
- On line access has been provided to book appointments, order repeat prescriptions and access to their medical summary.
- Electronic prescriptions service (EPS) have also been provided to patients so they can have a nominated pharmacy and we can electronically send their prescriptions to the pharmacy, it can save patients' journey to the surgery.
- 2 telephone consultation slots available for patients who want GP of choice and unable to book at required time, so they can at least speak to the GP regarding their medical needs.
- Last year CCG has provided extra funding 'IPLATO' messaging service for 2 way messages so now patients can 'cancel' via texting back.

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4. PPG Sign Off

Report signed off by PPG:

Yes

Date of sign off: 10.03.2015

How has the practice engaged with the PPG:

Our Patient Participation Group (PPG), has been selected to represent the diverse practice population. We used every patient contact as an opportunity to encourage patient's involvement including displaying poster in the waiting area and face to face meetings.

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

We tried very hard to get patients from different ethnic groups and other categories. As we have a mixed ethnic population we did not manage to engage patients from all ethnic groups. Admin staff and clinicians personally tried to speak to them, but they seemed less interested due to language barriers and work and family commitments. During any complaints or other meetings practice manager and staff did encourage them to be a part of the PPG.

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

Yes we have via patient practice survey, patient comments and suggestions box, patients' complaints and NHS choice website.

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

Yes

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

- Our appointment system has improved with the availability of the 48 hours and weekly appointments plus on line access, giving patients and carers the opportunity and flexibility to book appointments on their required time.
- Practice manager's recent audit shows an improvement in doctors waiting time.
- We have implemented a monitoring system to check staff performance via mystery shopper. We are also auditing telephone answering skills.

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

We have great difficulty in trying to engage patients from different age groups, ethnic origin and working people. Every year some members leave the group and we again have to start looking for new members. For the past 3 years we have had 3 different chair persons. It is also difficult for all the members to attend at the same time and same day. That is the reason why attendance is low and we cannot arrange 3 regular meetings.

Actions:

This year it seems like our PPG is taking more interest and they have decided to have at least 3 meetings. The next meeting has been arranged for the 5th June 2015 @ 5pm.

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