

**Patient Participation Enhanced Service 2016/17 Annex D: (PPG Survey Report 2016/17)**

London Region North Central & East Area Team  
Complete and return to: [england.lon-ne-claims@nhs.net](mailto:england.lon-ne-claims@nhs.net) no later than 31 March 2017

Practice Name: **Abbey Road Medical Practice**

Practice Code: **F84111**

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

Date: 16.03.2017

Signed on behalf of PPG: Mrs Hanna Plakhtienko

Date: 14.03.2017

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

Does the Practice have a PPG? <b>YES</b>
Method(s) of engagement with PPG: Face to face, Email, Other (please specify)  <b>We used several different methods to encourage patients to join our PPG. The method are as follows:</b> <ul style="list-style-type: none"><li>• Practice leaflet</li><li>• Information on the screen in the awaiting area.</li><li>• Displaying poster.</li><li>• Face to face meeting.</li><li>• Message on NHS Choices website.</li></ul> Our aim was to get a representative from all age and ethnic groups.

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Number of members of PPG: 12

Detail the gender mix of practice population and PPG:

%	Male	Female
Practice	3986 (51%)	3840 (49%)
PRG	7 (0.1%)	5 (0.1%)

Detail of age mix of practice population and PPG:

%	<16	17-24	25-34	35-44	45-54	55-64	65-74	> 75
Practice	1029 13.1 %	1005 12.8%	1718 21.1%	1671 21.8%	1201 15.3%	853 10.8%	403 5.1%	293 3.7%
PRG	0	1 0.01%	0	0	3 0.03%	4 0.05%	3 0.03%	1 0.01 %

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	1427	53	115	1059	64	39	29	76
PRG	3	1	0	3	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	288	203	844	142	315	1300	456	344	28	
PRG	3	0	1	0	0	1	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:

This year after trying very hard to get more people from different ethnic groups and age groups we found it very difficult to engage the younger generation (30-40).

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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.

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.

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?

**3 times a year.**

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### 3. Action plan priority areas and implementation

Priority area 1
<p>Description of priority area:</p> <p><b><u>Prebookable Routine Appointments:</u></b></p> <p>Our survey results shows that our appointment system has improved, however sometimes patients still finds difficult to book appointment in advance. We have identified that one of the reasons is that 20% of our pre-booked appointments are now available for on line access hence the reason patients who do not have access to on line booking are finding it difficult to book appointments.</p>
<p>What actions <u>were</u> taken to address the priority?</p> <ul style="list-style-type: none"><li>• Our standard wait for a pre booked appointment is within 2 weeks.</li><li>• 20% of our appointments are available on line for patients to book. We are promoting patients to register them on line. In a few weeks' time we will be sending text messages to patients to register on line.</li><li>• PPG has suggested an availability of a terminal in the premises for patients to book on line.</li><li>• In terms of absence and sickness we have arranged locum cover and the partners are doing some extra sessions.</li><li>• The Reception Manager is keeping an eye on the appointment booking flow on a daily basis, so anytime she finds that there are no appointments available after 2 weeks she is arranging extra GP sessions.</li><li>• One of our GP is on maternity leave and hopefully in 3 months' time things will improve further.</li></ul>

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- We are also encouraging patients to cancel their appointments in advance so these appointments can be given to someone else. If they do not attend for the appointment than we are sending DNA letters.
- We also have regular emergencies on the day and telephone consultations on a daily basis and patients have shown their satisfaction.

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

- Patients are registering themselves for on line booking and are satisfied.
- Our procedure for sending out DNA letters and encouraging patients to cancel appointments on time is also working.
- This information is available on our practice leaflet, Newmed screen in the waiting area and notices on the notice board, including 'NHS choice' website.
- In a few weeks' time we will be sending text messages to patients to register on line.

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### Priority area 2

Description of priority area:

#### Communication:

Reviewing our survey results, complaints, comments and suggestions and 'NHS choice patient comments' we have noticed that our practice communication still needs some improvement.

- Patients have shown less satisfaction in practice information handling, relying messages or information to them, interpreting test results etc. Clinical staff were not very clear about patients results and diagnosis which left them confused and making them come back to see another doctor.
- GP's filling results with no clear message.
- Action not taken on a timely manner on secondary and community care correspondence.
- Referrals not done properly.
- Repeat prescription issues.

For these problems patients were visiting practice more than once. After their visit they with leaving with some confusion and in frustration they were coming to the surgery and having arguments with the front desk staff and this generate complaints.

What actions were taken to address the priority?

To avoid the above complaints and to improve our customer care service for our patients so in their one visit patient can leave the surgery fully satisfied, or in terms of any confusions or queries we have taken the following steps:

- All the doctors have been reminded to take extra care and be more informative with the patients about their results, referral for further care and their medication.
- Clinical coder and the staff who receives and scans the document into the system, any abnormal or important information about the patients medication to update or any request for follow up referrals needs to be sent to the GP with high priority alert.

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- Designated staff member checks 'workflow' on a daily basis and distributes lab results and documents to the GP to file. She also checks that they are filing on time.
- We have arranged with the Medical Defence Union to provide training to our clinical staff.
- We have implemented a very strict policy for all our admin staff to report incidents.
- We have a trained member of staff who can provide advice and support to patients if they have any queries with regards to referrals, prescriptions, community and secondary care services. This member of staff is responsible to provide ongoing advice and support to patients with individual needs and complex queries.
- She also manages and supports our housebound patients, carers, cancer patients and other vulnerable groups. She contacts them regularly to find out how they are and if they need any support.

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

The patients can have easy access to someone in the surgery that can navigate them in the right direction and deal with their queries instantly and has saved their unnecessary journey to the surgery.

Patients with complex queries do not necessarily have to speak to front line staff but can come directly to the staff that is trained to deal with their queries to avoid further delay.

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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):

- More and more patients are registering on line to book appointments and request repeat prescriptions.
- Role of 'Patient Advice and Support Manager' is getting popular and patients are pleased and satisfied. She can listen to their queries and concerns on time before it becomes a complaint, and navigate them to the right direction. It can reduce their confusion and frustration if they think that during their consultation with the clinical staff or any encounter with the admin staff, they were unclear.



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### 4. PPG Sign Off

Report signed off by PPG:

**Yes**

Date of sign off: 14.03.2017

How has the practice engaged with the PPG:

We managed to have 3 meetings this year with the PPG members.

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. Young and working population does not seem to be interested. During any complaints or other meetings with the patients practice manager and staff do 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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Do you have any other comments about the PPG or practice in relation to this area of work?

It is very difficult to get all members of the PPG together which is suitable for everyone and the practice.

**Actions:**

**The next meeting has been arranged for August 2017.**

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