

# 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: [Bedford Hill Family Practice](#)

Practice Code: [H85009](#)

Signed on behalf of practice: A. C. d.

Date: 23 March 2015

Signed on behalf of PPG: M. S. J.

Date: 25 March 2015

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

<b>Does the Practice have a PPG? Yes</b>												
<b>Method of engagement with PPG: Face to face, Email, Other (please specify): Face to Face and Email</b>												
<b>Number of members of PPG: 25</b>												
<b>Detail the gender mix of practice population and PPG:</b>				<b>Details of age mix of practice population and PPG:</b>								
%	Male	Female		%	<16	17-24	25-34	35-44	45-54	55-64	65-74	> 75
<b>Practice</b>	<b>5721</b>	<b>6117</b>		<b>Practice</b>	<b>1750</b>	<b>991</b>	<b>4040</b>	<b>2258</b>	<b>1212</b>	<b>778</b>	<b>475</b>	<b>334</b>
	<b>48%</b>	<b>52%</b>			<b>15%</b>	<b>8%</b>	<b>34%</b>	<b>19%</b>	<b>10%</b>	<b>7%</b>	<b>4%</b>	<b>3%</b>
<b>PPG</b>	<b>10</b>	<b>15</b>		<b>PPG</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>1</b>	<b>2</b>	<b>7</b>	<b>12</b>	<b>3</b>
	<b>40%</b>	<b>60%</b>			<b>0%</b>	<b>0%</b>	<b>0%</b>	<b>4%</b>	<b>8%</b>	<b>28%</b>	<b>48%</b>	<b>12%</b>

**Detail the ethnic background of your practice population and PPG:**

	White				Mixed/ multiple ethnic groups			
	British	Irish	Gypsy or Irish traveller	Other white	White &black Caribbean	White &black African	White & Asian	Other mixed
Practice	5907	387	0	1796	76	54	134	636
	50%	3%	0%	15%	1%	0.5%	1%	5%
PPG	18	2	0	0	0	0	0	0
	72%	8%	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	274	214	57	120	226	472	443	164	0	878
	2%	2%	0.5%	1%	2%	4%	4%	1.5%	0%	7.5%
PPG	0	0	0	0	0	0	5	0	0	0
	0%	0%	0%	0%	0%	0%	20%	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:**

When the Patient Participation DES was launched in 2011/12, the practice put an advert in the surgery newsletter inviting patients to join the Patient Group. Patients were also given flyers when they attended their doctor or nurse appointment inviting them to join the Patient Group. An extract taken from the newsletter notice stated: *"We aim to gather around 100 patients from as broad a spectrum as possible to get a truly representative sample. We need young people, workers, retirees, people with long term conditions and people from minority ethnic groups"*.

About 17 patients responded to the notice and were invited to the patient group meeting in September 2012. Since then the patient group has grown to about 25 members and meet at least three times a year to discuss practice issues, priorities, patient surveys, complaints, suggestions, etc. The practice regularly reviews the patient group demographics and clinicians are asked to recruit or suggest patients in underrepresented groups. There is an advert placed on the practice website giving the date of the next meeting for new members and also an open advert in the practice leaflet. When newly registered patients attend their new patient check with the nurse, a prompt in the "new patient template" reminds the nurses to promote the patient group.

**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:**

- Internal Patient Survey
- Friends and Family Test Feedback
- Complaints and Suggestions
- NHS Choices Comments
- Practice Website feedback page
- Patient Participation Group

**How frequently were these reviewed with the PRG?**

The feedback was reviewed at Patient Group meetings in June 2014, September 2014 and February 2015. Minutes of all meetings are distributed to the patient group and kept on the practice Intranet. Copies are also made available in the waiting room.

### 3. Action plan priority areas and implementation

#### **Priority area 1**

##### **Description of priority area:**

- Running Late for Appointments – Time Spent in Waiting Room to see a Clinician.

##### **What actions were taken to address the priority?**

- The Late Arrivals Policy has been enforced, i.e. patient who arrive 15 minutes late, will need to rebook their appointment.
- The texting service has been introduced to confirm appointment information. Appointment times are confirmed. Receptionists have been asked to get up-to-date mobile numbers so that patients receive their appointment reminder.
- If a clinician runs more than 15 minutes late, they notify the Reception Team and patients are made aware.
- Patients who DNA (Did not Attend) three appointments in the last 6 months will be sent a letter advising them to cancel appointments they are unable to attend in the future so that the appointment could be allocated to someone else.

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

- Patients are more prompt for their appointments and understand the impact on the surgery and other patients when they arrive late.
- Patients receive text messages reminding them of their appointment date and time. This has reduced DNAs as well as the number of late arrivals.
- If a GP runs a bit late due to emergencies and something unforeseen, patients sitting in the waiting are made aware of this and can then make a choice as to whether they are able to wait or to rebook their appointment.
- The practice will continue to monitor waiting times as an ongoing action and share with the patient group.
- Posters put in the waiting room and on the website of actions taken to reduce appointment waiting times.

## **Priority area 2**

### **Description of priority area:**

- Getting Through on the Telephone

### **What actions were taken to address the priority?**

- We reviewed the telephone system and amended the queuing options to make it is more user friendly for patients. Regularly update the call queuing message with useful practice information about services and practice developments.
- To have an additional Receptionist answering the telephones during busy periods.
- Implemented a policy for patients to ring between 10.00am and 2.00pm for their blood test results. This will ensure that these calls are made during less busy periods.
- Advertised online patient access so that patients can book appointments, request repeat medication online and view their medical record summary.

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

- Patients now have information on their position in the queue, giving them the option to ring back at less busy times.
- There are four receptionists answering telephones during the busy periods, resulting in shorter telephone waiting times.
- Patients have more options available to them to contact the surgery, therefore reducing the telephone wait times.
- Posters put in the waiting room and on the website of actions taken to reduce telephone waiting times.

### **Priority area 3**

#### **Description of priority area:**

- Appointment Availability

#### **What actions were taken to address the priority?**

- In addition to signing up to the Extended Hours Access DES, the practice also agreed to participate in a local “Improving Access to Primary Care”. These extended hours’ clinics are run from 6.30pm-8.00pm during the week and on Saturdays between 8.00am and 1.00pm.
- The practice also agreed to provide Winter Access Clinics during the period from December 2014 to April 2015. The winter clinics run during the week from 3.30pm – 6.30pm (for children) and on Saturdays between 8.00am and 1.00pm.
- The practice will explore the possibility of Nurse triage involvement to alleviate the impact on GP appointments.

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

- Extended Hours Access – The practice provided an additional 10 hours of GP appointments per week and 3 hours of Practice Nurse appointments per week from April 2014 to March 2015. Additional appointments created easier GP access and increased patient satisfaction.
- Winter Access - The practice provided an additional 24½ hours of GP appointments per week from December 2014 to April 2015. Additional appointments created easier GP access, increased patient satisfaction and fewer A&E attendances.
- Two Practice Nurses booked on to a Minor Illness training course, however, the course was cancelled at the last minute due to the lack of numbers. However this has now been rescheduled to take place in May 2015.

## **Progress on previous years**

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

### **Action Plan Achievements**

- Invested in two additional ISDN telephone lines to improve telephone access.
- Doors are opened at 8.15am so that patients are able to book appointments at the reception desk.
- Providing additional late night and Saturday GP sessions.
- GP Locum cover when more than one GP is on annual leave
- When carrying out telephone consultations, GPs return telephone calls within half an hour of the patient allocated slot.
- Signage in place to distinguish the two GP Practice at the Health Centre.
- Varying times for telephone consultations during the day.
- Receptionists offer all patients telephone consultations as a first choice when booking an appointment, if appropriate.
- Advertised telephone consultations in the waiting room, practice booklet and website.
- There is a mix of on-the-day and pre booked appointments available based on patient demand.
- Promoting the NHS 111 service to patients. NHS 111 is a recently launched service for patients who need medical help fast out of hours, but it's not a life threatening situation.
- Resolved problems around Electronic Prescribing as a number of prescriptions were still being printed locally instead of being electronically sent to the Pharmacy.
- Made it clear in the practice booklet how requests for repeat prescriptions work.
- There are at least two receptionists at the front desk during the Extras Clinic at the end of morning and evening surgery to help with the queue.
- Receptionists attended customer services training. Most have attended; others are booked to go on training soon.
- Advertise and promote the website and online services more to patients at time of registration. Posters are visible in the waiting room.

#### 4. PPG Sign Off

Report signed off by PPG: YES/NO

Date of sign off:

##### **How has the practice engaged with the PPG:**

- The practice meets with the Patient Group at least three times a year. In the last financial year we met with the group in June 2014, September 2014 and February 2015 to discuss practice issues, priorities and concerns.
- We also discussed feedback from patient complaints, surveys, friends and family test, website feedback, NHS Choices website, etc. and get patient input on how we can improve.

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

- There is a complaints, comments and suggestions box left permanently in the waiting room for patients to leave feedback.
- Minutes of patient group meetings are left in the waiting area for patients read and see what work the patient group does.
- There is an advert placed on the practice website giving the date of the next patient group meeting to recruit new members and also an open advert in the practice leaflet.
- When newly registered patients attend their new patient check with the nurse, a prompt in the “new patient template” reminds the nurses to promote the patient group.
- One of the GPs from the practice made a visit to a “seldom heard” group in Wandsworth (Alzheimer’s Society) and had a discussion with the manager and care support worker about how patients and carers can self-refer or be referred by a GP. They get allocated a case worker who makes home visits.



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

- Patient feedback has been received from patient complaints, surveys, friends and family test, website feedback and the NHS Choices website.

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

- Yes, the priority areas were discussed with the PPG at the meetings.

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

- Patients receive text messages reminding them of their appointment date and time. This has reduced DNAs as well as the number of late arrivals.
- There are four receptionists answering telephones during the busy periods, resulting in shorter telephone waiting times.
- Patients have more options available to them to contact the surgery, therefore reducing the telephone wait times.
- Additional appointments have created easier GP access and increased patient satisfaction.

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

- No