

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

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: **Seven Kings Practice**

Practice Code: **F86637**

Signed on behalf of practice: *E. C. Smith*

Date: **30.03.2015**

Signed on behalf of PPG: *B. J. Holland*

Date: **31.03.2015**

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 regular meetings**

Number of members of PPG: **7 (Seven)**

Detail the gender mix of practice population and PPG:

%	Male	Female
Practice	1984	1878
PRG	2	5

Detail of age mix of practice population and PPG:

%	<16	17-24	25-34	35-44	45-54	55-64	65-74	> 75
Practice	775	350	723	493	515	472	267	267
PRG					3	1	2	1

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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	519	9	0	114	26	7	17	37
PRG	3	0	0	1	0	1	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	889	388	125	13	78	96	98	23	0	15
PRG	1	1	0	0	0	0	0	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:

Every effort was taken to maintain fair representation in the PPG group of the practice. We had enquired with several patients in satisfying the above motive. Several of them were happy to morally support us, but unfortunately could not commit to joining the group due to varied reasons.

Most declines hovered around reasons related to work commitments, timings, unavailability for regular meetings etc.

Therefore we went along with the members who were kind enough to commit their time and effort for working with and joining the PPG. We have been actively advertising invitations to voluntarily join the PPG since then and are hoping to receive expressions of interest from people from various communities.

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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:

The feedback were received through various sources:

- Patient feedback form
- FFT
- PRG
- Face to face
- Telephone etc

How frequently were these reviewed with the PRG?
These were reviewed with the group regularly on a monthly basis.

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3. Action plan priority areas and implementation

Priority area 1

Description of priority area:

Enhancing the care for Diabetics was one area of discussion raised by some patients as well as by some PPG members on behalf of a group of patients. Since our practice population had a majority of diabetics, we felt that this area needs to be looked into for areas of improvement.

What actions were taken to address the priority?

With more focus on the efficient care of Diabetics, our Doctors and Nurses conjointly with the management team worked on making sure that all relevant care was given to the patients. QOF Analysis was done and stringently followed to the best of our abilities towards improved care.

The principal GP and our practice Nurse both have now received special Diabetic training from a Diabetic specialist Nurse.

We are intending to draft an action plan this year for the care of Diabetics in the light of this new training received, where all gaps of potential improvement in Diabetic care inferred through the QOF analysis shall be looked upon and exploited.

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

Following the special Diabetic training received by the Dr and our practice Nurse, we are intending to draft an action plan this year for the care of Diabetics in the light of this new training received, where all gaps of potential improvement in Diabetic care inferred through the QOF analysis shall be looked upon and exploited. Once the plan is confirmed, we intend to advertise and publish as appropriate to attract more diabetics to a more efficient way of managing their diet & Diabetes.

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Priority area 2

Description of priority area:

There was considerable concern of patients with regards to availability of appointments at the practice.

What actions were taken to address the priority?

This feedback from patients was good in a way for us to ascertain that the new initiation of online patient booking has not reached all ears.

Though we had advertised on our reception area and have gradually started receiving registrations for the same, on analysis, we could see that a lot of online appointment slots have been left unused. These appointments are not wasted, since these are offered to patients after on line registration time out.

All receptionists were given a revised training as and when appropriate to make them aware of the various features of the Patient online registration programme and the corresponding procedures to be followed in the GP system (EMIS Web). All feedback on the use of the system along with reporting of glitches was passed on to the Business Manager, who in turn proactively contacted the patient and rectified the issue straight away. The intention was to avoid patients from thinking that Patient On-line registration was a hassle than a boon. The receptionists are doing a very good job in mentioning this on line facility at the counter and through the telephone with almost all patients.

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

The feedback we currently receive is great as more and more people are registering for the same. Patients who have got issues or problems logging in are connected straight to the Business manager, who either succeeds in rectifying the problem straight away or reports it to the Pt On line Project team at the CCG level.

We have now proactively asked the receptionists to mention the availability of such an easy and good facility over the counter and through the telephone with all patients and also to print out the log in details immediately on expression of interest.

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Priority area 3

Description of priority area:

We had received feedback from couple of patients and also from members of the PRG regarding the duration of appointments. The overall feel was that some patients necessitated more time to speak to the clinicians for various reasons.

What actions were taken to address the priority?

We understood the concern of such patients and reassured them that this shall be passed to all clinicians at our practice.

We also made them understand the way the system works in the NHS where 10 minute appointments are given to all patients to maximise the patient access to the Doctors.

We have reassured them that all clinicians have always been ethically considerate to give extra time to patients who may need it. We kindly requested the patients to understand that one of the repercussions of such extended times could bring delay in time keeping for the following appointments which needs to be borne in mind and appreciated.

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

We feel that this feedback was very significant as many service users were not aware of how the system works and why on occasions there is a delay in being seen.

It was also emphasised that any such significant delay should be announced in the reception hall so that the patients are aware of this fact and could rightly appreciate the time spent on emergency conditions or with patients who needed more time.

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Progress on previous years

Is this the first year your practice has participated in this scheme?

Yes

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

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4. PPG Sign Off

Report signed off by PPG:

Yes (Signed off by Brenda Holland, Secretary of Seven Kings Practice PPG group)

Date of sign off:

31.03.2015

How has the practice engaged with the PPG:

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

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

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

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

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

The practice has attempted to include representation from all groups and communities and finally was successful in developing a very good PPG group with fair representation from different ethnic groups.

Though there weren't any seldom heard groups in our practice, we are now actively advertising through word of mouth and posters at the reception, towards recruiting more voluntary members to the PPG. We hope to get more expressions of interest from various communities and groups to strengthen our PPG and to make us aware of any gaps to be filled in our efficient service delivery.

We have been and are currently receiving good feedback from patients and service users through

- Patient feedback form**
- FFT**
- PRG**
- Face to face**
- Telephone etc**

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We have considered some good feedback from our patients and have been considering many of them in our PPG meetings.

Many of them were discussed in the PPG meetings and priority areas were decided and discussed in the meetings, as discussed and explained above.

Topics other than mentioned in the priority areas include concerns on vehicle parking, reception waiting area, having a separate notice board at reception etc.

As a result of the discussions and the actions following it, there has been a good positive change in these areas.

- The Doctor and the practice Nurse have undergone special training in Diabetes and are now better equipped to maximise efficiency in managing Diabetics.**
- More and more patients are registering to the On-line facility of booking appointments and are now feeling much easier to see their Doctor. All issues or concerns in registration or usage of the facility are being directly solved straight away by senior management as part of promoting this facility.**
- Patients have been reassured that those needing more time with the Doctors shall definitely be considered as always for double booking to make sure that they have ample time to communicate efficiently with their clinician. Patients shall also be notified at the reception in case of significant delay and its corresponding reason.**

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