

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: Andover Medical Centre

Practice Code: F83666

Signed on behalf of practice:  Marta Cabrera, Practice Manager Date: 30th March 2015

Signed on behalf of PPG:  Attendees of PPG Meeting Date: 23rd March 2015

Mr. Noel Ryle

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 mailing list, PPG meetings, Word of mouth, Practice Website, SMS messaging, Registration process, Advertising on the repeat side of the prescriptions and posters in the waiting room.

Number of members of PPG: 187

- Group of 32 PRG members registered for face to face meetings
- Virtual Group of 155 members on our PRG mailing list

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Detail the gender mix of practice population and PPG:

%	Male	Female
Practice	2884	2936
PRG	77	110

Detail of age mix of practice population and PPG:

%	<16	17-24	25-34	35-44	45-54	55-64	65-74	> 75
Practice	1012	566	1819	902	616	377	304	224
PRG	0	24	79	36	14	19	7	8

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
Practice	1407	211	unknown	1834	97	25	24	155
PRG	30	4	0	72	0	0	0	3

	Asian/Asian British					Black/African/Caribbean/Black British			Other	
	Indian	Pakistani	Bangladeshi	Chinese	Other Asian	African	Caribbean	Other Black	Arab	Any other
Practice	79	43	126	101	214	501	288	410	9	296
PRG	2	1	1	1	5	6	6	2	0	54

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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:

Our PPG group is advertised to all our patients:

- TV screens and posters in the waiting area and on our website, which can be translated in 90 languages inviting everyone to join our PPG.
- We advertise our regular meetings clearly in the reception area; all patients visiting the surgery are welcome to take a copy of the meeting agenda and previous meeting minutes or reports home with them.
- PPG Sign-up forms are attached to all new registration forms and both admin and clinical staff also actively ask patients if they are interested in joining our PPG.
- We advertise our PPG on the back of the prescription forms.
- We explain the purpose and how important it is to us to gain patient feedback about all the issues at the surgery and patient experience via PPG to all patients registering at the surgery.
- At the point of registration process we invite all patients to join our PPG; non-English speaking patients can be assisted as we have French, Spanish, Portuguese, Hindi, Creole, Czech speaking staff.
- Patient mailing list is being updated based on the sign up forms and emails sent to the patients on regular basis.
- We provide the visually impaired with specially adapted meeting minutes and agendas for the meetings typed in large letters.
- We invite different groups such as carers, patients with learning disabilities.
- We hold the meetings in easily accessible area for those with mobility issues.

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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?

YES. Our practice is located in a deprived area of Islington.

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

- We have some housebound patients and have therefore selected Carers as a group, and we also have a large population of patients with long term conditions.
- Face-to-face contact at the reception desk where invitation and information about PPG is given.
- Direct phone calls to patients.
- Invitation letter sent to carers of patients on our housebound list.
- Patients with long term conditions also get invitations to the PPG on their prescriptions.

We have invited some carers but with this group we found that due to their responsibilities they are not available or interested to attend our PPG meetings.

A few patients with long term conditions have engaged with our PPG and are regularly attending our meetings.

Despite of our efforts we find that it is very difficult to engage specific patient groups with our PPG.

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1. Review of patient feedback

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

- The NHS Friends and Family Test
- iWantGreatCare website feedback
- NHS Choices website feedback
- Suggestion/Comments box at the reception desk

How frequently were these reviewed with the PRG?

At PPG Meetings annually.

2. Action plan priority areas and implementation

Priority area 1

Description of priority area:

Appointments availability and reduction of DNA rates

What actions were taken to address the priority?

- DNA letters sent to patients who keep missing their appointments

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- We have reduced the number of locum sessions – locum doctors tend to have higher DNA rates
- Patient Access on-line – on-line appointment booking system in place, all patients are now able to sign up for this service through a link on our website.
- One of the partners is providing an additional session on weekly bases, and the appointments are being released according to weekly demand.
- We have organised a minimum standard of sessions per week.
- We have assigned an accountable GP to patients over 75 and on our Unplanned Admissions Register

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

Patient Access Online – publicised on our website, there are appointments available every day for mornings, afternoons and the extended hour's clinic. Online appointment booking and online prescription requests mean easier access for both patients and carers. 321 patients are actively using online Patient Access.

The number of complaints regarding appointments booking system has been reduced.

Patients are able to book appointments on the day, and up to six weeks in advance. We also offer telephone triage and the doctor can book appointments on the day for urgent access in the morning and afternoon if it is necessary.

The website contains information about the appointment system.

Reception staff provides patients with information in regards to effective appointment booking with the right clinician (e.g. their accountable GP) for continuity of care.

This information is also advertised in the waiting rooms on notice boards.

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Priority area 2

Description of priority area:

Staffing, staff training and reduction of staff turnover

What actions were taken to address the priority?

- Members of reception staff are taking government funded courses for one year from Life Training in: Team Leading including customer service and Business Administration.
- In-house staff training based on patient feedback from complaints, nhs choices or comments (discussed at whole team/reception meetings)
- Changes in the recruitment process. E.g. recruit people with NHS experience.
- We have employed another member of staff with experience to deal with prescriptions.
- We have increased reception staff hours.

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

- Better and more efficient customer service for patients/carers.
- Increased Patient Satisfaction
- Positive feedback regarding reception staff received via Friends and Family questionnaires feedback forms. This feedback is published in our waiting room on monthly basis.

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Priority area 3

Description of priority area:

Patient involvement and education

What actions were taken to address the priority?

The practice has been participating in several pilot projects and enhances services promoting better and more specialised patient care leading to greater patient involvement, self-care and self-education.

- ✓ We discuss all new services and projects in the PPG meetings.
- ✓ Our clinical staff – doctors, nurses, and healthcare assistant offer and explain the benefit of the services available to the patients.
- ✓ We regularly explain our appointment system and access to urgent appointments to patients over the phone.
- ✓ We sent out DNA letters to educate patients about DNA rates and impact on appointment availability.
- ✓ Information about some of these services is offered through letters, leaflets, practice website, telephone invitations, text messages, face-to-face contact at reception.

Services at the practice during 2014/15:

• **Avoiding Unplanned Admissions** – Patient education in regards to effective use of our appointment system (urgent/on the day appointments, triage phone calls etc.), medication compliance and self-care (for long term/chronic conditions management etc.) to reduce the need for AE attendances or unplanned admissions. This involves:

- Personalised Care plans
- Post-hospital discharge follow up phone calls
- And care plan reviews for patients with frequent unplanned admissions (We have 2.10% of adult population on the case management register).

• **Accountable GP for patients** – All patients over 75 and vulnerable patients from our AUA Case Management Register have been assigned an Accountable GP who is responsible for their overall care. Patients are advised regarding continuity of care. (letter sent)

• **NHS Health Checks** – for over 75 (separate service) and for patients with chronic conditions. Health and lifestyle advice given to patients by our HCA.

• **Influenza vaccinations and campaign** – from October 2014 – March 2015, service promoted and advertised. Flu prevention campaign.

• **Clinical Commissioning & Long term conditions** - (Dr Roy Islington is the clinical lead)

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Projects at the practice during 2014/2015:

- **Smoking Cessation Hub** - Smoking cessation specialist Stephanie Duckworth-Porras provided advice and guidance to patients struggling with their smoking cessation and namely patients suffering from COPD and Asthma. Held every Mon PM from January to March 2015.
- **Respiratory Pharmacist sessions** - Layla Siebert provided reviews for patients referred to her by a GP due to their overuse of inhalers. Patients were advised and educated on how to correctly and efficiently use their inhalers and asthma medication.
- **Islington Age UK/Locality navigator sessions** – Lauren Phillips from Islington Age UK provides guidance and advice to patients wishing to see her for additional support or who are referred to her by a GP and connects them with local services. The sessions are usually held every few weeks on Thursday mornings at the surgery.
- **Shine Project** – provides advice and grants to reduce energy bills, help with gas and electricity debt, home security check, home assessments to prevent falls, fire safety checks, social/networking support, Telecare service, daily information on air quality, benefit checks and help obtaining them. shine@islington.gov.uk (08009531221)
- **Primary Care Mental Health Pilot** – Islington Primary Mental Health Team hold sessions at the practice on weekly basis. It was suggested by PPG members in the past that this type of project would benefit the local patient population. This is an ongoing project and patients are referred to the Mental Health Team by their GP.

Patient involvement through patient feedback:

- ✓ At the meetings
- ✓ Patient suggestion box
- ✓ Friends and Family
- ✓ NHS Choices and practice website

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

- Through the services we provide our patients are benefiting from further health care and lifestyle education. Therefore we are working towards improving population health in our practice area.
- The results are indicated in our QOF outcomes and in our practice profile report.

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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):

Please find reports from previous years on the next page

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Updated Action Plan from Previous Year 2013/14

You said, (The Patients)	We did, (The Practice)	The outcome was...
<p>Appointment System</p> <p>* Review the appointment system, and offer more emergency appointments during the day, especially on the busiest days of the week. Monday and Friday.</p> <p>* Offer appointments in advance for more than one week. Patients only can book appointments up to one week in advance</p> <p>*Offer to the patients the option to book appointments online.</p> <p>*Reduce the number of DNA appointments by closer monitoring.</p>	<p>* The appointment system was reviewed and overhauled with the support of Primary Care Foundation.</p> <p>Many changes were done in order to provide a more efficient appointment system.</p>	<p>We offer additional walk-in on the day emergency appointments on Monday and Friday mornings.</p> <p>We offer telephone triage where the doctor and reception can release daily appointments when necessary.</p> <p>* We now offer appointments for as far as up to six weeks in advance.</p> <p>* Emis Access online booking system is now being used by 5%, (290) patients who have signed up for the service and able to book appointments online.</p> <p>* We are now continuously monitoring DNA rates and EmisWeb is now automatically recording DNA rates, and we can act upon these alerts.</p>
<p>Telephone Access</p> <p>*Continue to collect communications statistics - number of phone calls am, pm, etc. to evaluate changes made and make further improvements where necessary.</p> <p>*Increase staff hours availability, based on the daily statistics. Patients should be able to get through the phone and Reception should be able to answer the phones in minimum time.</p>	<p>The practice monitored and recorded the telephone traffic on a daily basis.</p>	<p>* We have obtained some quotations to replace the telephone system. This new system will collect data automatically and thus allow accurate reports on answering times and telephone traffic.</p> <p>The system will be installed in 2014.</p> <p>* The staff hours have increased and changed to cover the peak times</p>
<p>Opening Hours</p> <p>*Analyse and review the option to open at different times e.g. lunch hours or earlier in the morning.</p> <p>* Open in the mornings 10 minutes before 9 a.m. to avoid queues and delays for the morning appointments.</p>	<p>* We conducted a survey about the times for extended hours and the patients were satisfied with the current available times.</p>	<p>*The reception staff now opens the doors at 8:50am to reduce the queue for the morning surgery, if the patients arrive early.</p>
<p>Improve Reception Customer Service</p> <p>*More training to all Reception staff in customer service should be done to improve communication between patients and reception.</p> <p>*In house training through monthly meetings and book an external course on customer service.</p>	<p>* We provided to the Reception and admin staff with in house training and additional training from outside agencies in customer service, complaints, management urgent access, mental health, so they can offer better service and understanding of patients' needs, contributing to develop the standards of practice at the Andover Medical Centre.</p>	<p>* The Reception and Admin staff are better prepared in managing all different scenarios that we encounter on a daily basis and to offer a better service.</p> <p>* We have received many positive comments about the reception service through the patient survey.</p> <p>The patient satisfaction with the reception customer service was 90% - It has risen by 1.7% since last year (88.3%)</p>

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Updated Action Plan from Previous Year 2014/15

You said, (The Patients)	We did, (The Practice)	The outcome was...
<ul style="list-style-type: none"> New telephone system to be installed by July 2014. Practice Manager and the IT lead will oversee the project. A new telephone system should queue calls more effectively providing the respective caller with waiting time and their queuing position. The system will provide statistics for monitoring, managing and reporting of telephone traffic. Also, one member of the reception staff is to be delegated to deal solely with phone calls in the back office. Depending of the demand during the year, we will review the possibility of increasing staff hours in reception. 	<p>The practice contracted new telephone system with Opus Telecommunications, which was finally implemented in October 2014.</p> <p>This system provides queuing of calls, queuing position, waiting time and recording phone calls for training purpose when needed. The system allows to record different messages according to the extension.</p> <p>One member of the reception staff is now delegated in the back office to solely deal with calls between peak hours e.g. in the mornings.</p> <p>We have also extended telephone duty cover by reception staff during our lunch hour break for calls received on our by-pass number from secondary care providers and allied professionals (district nurses, social workers etc.)</p>	<p>New system in place, that allows multiple callers to call at the same time.</p> <p>More advanced system in place, better patient access The practice monitored and recorded the telephone traffic on a daily basis. The system allows patients to access better information.</p> <p>Phone calls answered promptly by a delegated member of staff. Continuous phone cover ensured. Staff cover has increased.</p> <p>Improved access and communication for secondary care providers and allied professionals (district nurses, social workers etc.)</p>
<ul style="list-style-type: none"> Promotion of Emis Access Online Booking System during the course of 2014-2015. We already have 5% of practice population using this service, however it is clear that the practice needs to further promote this service and make it accessible to a higher proportion of patients (at least 10%) by promoting it in the waiting room through our patient leaflet, at point of registration and by word of mouth (reception staff and clinicians). In addition, we will monitor how the on-line system is released, so we can consequently offer more appointments when it is necessary. 	<p>System in place that allows online appointment booking, prescription requests.</p> <p>The service is offered to all existing patients and new patients.</p>	<p>Easier online booking access for patients/carers. More appointments available daily and at different times.</p> <p>5.51% (321) are now actively using this service.</p>

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<ul style="list-style-type: none"> Improvement of Test Result Queries Service by June 2014. The surgery needs to better advertise the dates and times when patients can contact the surgery regarding their test results. This can be done during the patient registration process, posters on display in the waiting room area and making it more visible in the website. PRG members also suggested we look into other systems to provide the results such as e-mailing, but we have to consider confidentiality issues in regards to this. 	<p>We have informed the patients through our website, during their new patient health checks and via telephone system message.</p> <p>Regular times for the healthcare assistant have been assigned for giving test results to patients. Patients are advised to call at these times, however, reception now take messages which are logged and our HCA returns the call on the day.</p> <p>We have stopped texting patient text results via our NHS mail as there were concerns about patient confidentiality and confusion.</p>	<p>Test Result Service times clearly advertised.</p> <p>Message for HCA to call back processed on the same day and this is logged in the system.</p> <p>Reduced queries and telephone calls from patients.</p>
<ul style="list-style-type: none"> Improvement of Prescription Services. A new electronic prescription system will be implemented by October 2014. We are currently awaiting further information from the Clinical Commissioning Group (CCG). 	<p>The system was implemented in November 2014.</p>	<p>Patients can now sign up for their EPS and request their prescription to be sent directly to the chemist of their choice, facilitating better access for prescription collection suited around patient needs.</p> <p>Eco friendly service – paper and time spent reduced.</p> <p>Audit trailed service</p>
<ul style="list-style-type: none"> Continuity of Care during the course of 2014- 2015. We will look into reducing the need for locum cover by considering employing a new GP registrar as we are a training practice, if the option is available. We will review the appointment booking process at reception level and provide the reception staff with training to promote continuity of care. 	<p>Two new GP Registrars were employed. Long term locum was arranged Avoiding Unplanned Admissions DES implemented Named GP for patients over 75 Reception staff have been enrolled on training courses. Training has been provided at clinical and admin meetings.</p>	<p>Reduced need for locum GP cover.</p> <p>Individualised care plans, Accountable GP assigned providing continuity of care.</p> <p>Team development providing better customer service, continuity of care by booking appointments with accountable GP, reducing complaints and improving communication with patients.</p>
<ul style="list-style-type: none"> Design a Leaflet to promote the services (on-line booking, test results and prescriptions) This leaflet will provide clear information about the services, times and who to contact. 	<p>Information is available on the website and in the waiting rooms.</p>	<p>Ongoing process.</p>

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PPG Sign Off

Report signed off by PPG:

YES – PPG meeting held on Monday 23rd March 2015

Date of sign off: Monday 23rd March 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?

We acknowledge that the practice has made all the efforts to engage more patients in the PPG using all the systems mentioned in the previous sections of this report. And also we are aware that the participation in the forums has increased and PPG has improved significantly since it was established. We have received regular communications and information is available on request.

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

In the previous meeting we have reviewed the results from the different sources such as: NHS Friends and Family Questionnaires, iWantGreatCare, NHS Choices feedback and Patient suggestion/comments box.

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

The previous report 2014 was reviewed at a PPG meeting held on September 22nd 2014 and priority action plan areas for 2015 have been agreed with the PPG members on January 19th 2015.

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

- Better customer service.
- Continuity of care and follow up appointments offered.
- Caring for patients of all ages.
- More specialised services offered. – E.g. – mental health project – very useful in this area.

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

We would like to expand our PPG and will aim to target, e.g. younger population.

We found that our PPG meetings are an open forum for all patients where various topics regarding the practice and patient services have been covered in the meetings such as; staffing, appointments, complaint, services.

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