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 2015

Practice Name: Rutland House Surgery

Practice Code: F85688

Signed on behalf of practice: Caroline King Date: 31.3.2015

Signed on behalf of PPG: Mr Paul Mackney Date:24.3.2015

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

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| Does the Practice have a PPG? YES | |
| Method(s) of engagement with PPG: Face to face, Email, Other (please specify)  Email  Face to face | |
| Number of members of PPG: 13 | |
| Detail the gender mix of practice population and PPG:   |  |  |  | | --- | --- | --- | | % | Male | Female | | Practice | 48% | 52% | | PRG | 42% | 58% | | Detail of age mix of practice population and PPG:   |  |  |  |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | --- | --- | --- | | % | <16 | 17-24 | 25-34 | 35-44 | 45-54 | 55-64 | 65-74 | > 75 | | Practice |  |  |  |  |  |  |  |  | | PRG | 0 | 0 | 1 | 1 | 3 | 4 | 4 | 0 |  |  |  |  | | --- | --- | --- | | Age: Number of patients:  0-09 695 12% |  |  | | 10-19 672 12% |  |  | | 20-29 774 13% |  |  | | 30-39 1168 20% |  |  | | 40-49 1073 18% |  |  | | 50-59 665 11% |  |  | | 60-69 394 7% |  |  | | >70 393 7% |  |  | |  |  |  | |  |  |  | |  |  |  | |
| 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 | 2664 | 130 | 0 | 1642 | 69 | 1 | 55 | 27 | | PRG | 10 |  | 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 | 93 | 25 | 19 | 59 | 96 | 163 | 55 | 75 | 3 | 216 | | PRG | 0 | 0 | 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:   * A leaflet is displayed in the waiting area inviting patients to join the PPG. * The process is now part of the New Registration pack which new patients to the practice are supplied with and it is discussed as part of the registration medical with the HCA. * An invitation to join the PPG is on our website. * Patients who opportunistically provide feedback to the GP’s, reception staff or practice manager will be invited to join 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: | |

1. Review of patient feedback

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| Outline the sources of feedback that were reviewed during the year:   * Comments, complaints and suggestion box within the waiting area * Patient Satisfaction Survey carried out on an annual basis * Friends & Family test which we have been gathering data from since December 2014 * NHS Choices which is an ongoing source of feedback * Analysis of patient complaints which is carried out on a quarterly basis within the practice |
| How frequently were these reviewed with the PRG?  Twice a year |

1. Action plan priority areas and implementation

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| Priority area 1 |
| **Description of priority area:**  Review of telephone access |
| **What actions were taken to address the priority?**  Telephone access was increased from 8:30am to 8:00am to allow patients who needed to telephone earlier than previously offered. This allows for staff to concentrate on dealing with telephone calls for half an hour before the front door opens to patients. The number of reception staff on duty at 8:00am has increased in order to manage the telephone more effectively. Once patients present at 8:30am face to face the reception team are able to concentrate without the telephone rush interrupting as it previously had done. On days with higher demand, the reception team increases again at 8:30am. By reducing the stress levels at reception, staff and patients have had an easier initial contact first thing in the day. |
| **Result of actions and impact on patients and carers (including how publicised):**  Survey results have improved in regards to the time being dealt with at reception (please note that during the survey our manual check in system was out of order so this is based on face to face interaction). The results are published on the website. |

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| Priority area 2 |
| **Description of priority area:**  **In**creased GP availability on Friday mornings. |
| **What actions were taken to address the priority?**  Prior to September 2014, the practice had two doctors on duty one of whom carried out a surgery for 1.5 hours, this has now been increased to 3 hours and has therefore extended the number of appointments available. An additional telephone consultation has also been added to this session which also improves access. |
| **Result of actions and impact on patients and carers (including how publicised):**  Capacity for appointments has increased and that has meant that we also have been able to increase the number of “book in advance” appointments on a Friday morning. Following the adaption to the telephone consultation system, there is now improved access for patients to both see a Dr face to face and have telephone consultations. |

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| Priority area 3 |
| **Description of priority area:**  Test Results |
| **What actions were taken to address the priority?**  Each doctor has been allocated up to eight telephone consultations at the end of their surgery to allow patients to speak to Dr re test results etc which had shown to be an area in previous years which patients had found to be a challenge. |
| **Result of actions and impact on patients and carers (including how publicised):**  This now means that the patients are able to access information regarding tests results sooner than in previous years and this has been reflected in the survey results this year with the highest ever level of satisfaction. |

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):

2011/2012

* Additional GP recruited for 3 sessions per week to improve appointment availability of appointments.
* Change of 0844 Telephone Number to local rate number
* Restructure of the reception staffing to ensure that adequate cover was in place to accommodate peaks in demand throughout the day

2012/2013

* Introduction of online appointment bookings
* Introduction of generic practice email address for patients to contact us on
* Redecoration of the patient waiting area

2013/2014

* Increase the number of PRG members, this is ongoing and is part of our new patient recruitment
* Audit and review of appointment system in comparison to A&E attendance rates during opening hours, as a result there appeared to be a high demand for Thursday PM sessions, we therefore increased our clinical sessions accordingly.

2014/2015

As outlined above

1. PPG Sign Off

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| Report signed off by PPG:  Yes Mr Paul Mackney (vice chair)  Date of sign off: 24.3.2014 |
| How has the practice engaged with the PPG:  The practice engages via email which has proven effective due to work commitments etc of group members. There is an aim to meet face to face once or twice a year which historically has proven difficult to achieve, hence the email contact.  How has the practice made efforts to engage with seldom heard groups in the practice population?  At point of registration, our HCA tries to engage all patients to join the PPG. We have advertised this on the website and it is displayed within the practice.  Has the practice received patient and carer feedback from a variety of sources?  Feedback is received from a variety of sources including patient survey, complaints, NHS choices, direct feedback from patients within the practice on a face to face basis and more lately through the friends & family test.  Was the PPG involved in the agreement of priority areas and the resulting action plan?  The items within the action plan had been discussed in meeting with the PPG previously. The PPG are involved in setting out and approving the survey questionnaires that are distributed to patients on an annual basis and for reviewing the results of the survey once complete.  How has the service offered to patients and carers improved as a result of the implementation of the action plan?  Patients and carers now have improved access to the practice and increased access to the GP’s via the telephone system for results, telephone advice etc.  Do you have any other comments about the PPG or practice in relation to this area of work?  The practice would like to involve the PPG in the forthcoming year for some health improvement and promotion work, to have more engagement within the practice as a whole. |

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