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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: Wordsworth Health Centre

Practice Code: F84074

Signed on behalf of practice: R.Patel Date: 17.03.15

Signed on behalf of PPG: M.Wilson Date:17.03.15

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)  Face to face and email | |
| Number of members of PPG: …8.. | |
| Detail the gender mix of practice population and PPG:   |  |  |  | | --- | --- | --- | | % | Male | Female | | Practice | 52 | 48 | | PRG | 50 | 50 | | Detail of age mix of practice population and PPG:   |  |  |  |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | --- | --- | --- | | % | <16 | 17-24 | 25-34 | 35-44 | 45-54 | 55-64 | 65-74 | > 75 | | Practice | 23 | 11 | 24 | 15 | 10 | 9 | 5 | 4 | | PRG | 0 | 0 | 0 | 0 | 37.5 | 25 | 25 | 12.5 | |
| 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 | 1 | 1 | 1 | 9 | 1 | 1 | 1 | 1 | | PRG | 12.5 | 0 | 0 | 12.5% | 12.5% | 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 | 33 | 19 | 7 | 1 | 5 | 3 | 2 | 3 | 1 | 1 | | PRG | 37.5% | 12.5% | 0 | 0 | 0 | 0 | 12.5% | 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 number of steps to improve representation were taken. These include:   * Some younger patients between 25-34 years were invited verbally by staff and in writing, following complaints or concerns about their experience of the practice (some interest but not succesful) * Posters inviting people to join the PPG highlighted the benefits of volunteer work on CV and university/college applications. This was aimed at16-20 age group (some interest but not succesful) * Posters highlighting benefits of voluntary work for unemployed and improving CV (not successful ) | |
| 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:   * Health Watch Report * CQC Report * Complaints, six monthly * Suggestion box * Friends & Family Test monthly reports * Patient Survey 2013-2014 * PPG Friends& Family question |
| How frequently were these reviewed with the PRG?  All reviewed by PPG by email and discussed at meetings which were mostly held at bimonthly intervals. HW report reviewed once, CQC report once, Complaints twice, suggestions once, Patient survey action plan once, PPG F&F question twice |

1. Action plan priority areas and implementation

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| Priority area 1 |
| Description of priority area:  Monitor and improve appointment system |
| What actions were taken to address the priority?   * Comments taken into consideration from all sources (listed above as feedback that was reviewed) * Action Plan from Patient Survey 2013-2014 included these actions and went towards addressing this area which is a constant priority  |  |  |  |  | | --- | --- | --- | --- | | Cost of phone calls | Telephone message to be shortened, improved and updated | Practice Manager and Dr Goodyear | End of June 2014 | | Phone lines are too busy | Review of online access | The Practice Manager and Operations Manager | End of September 2014  (action completed March 2014) | | Phone lines are too busy | Installation of additional phone lines | Practice Manager | April 2014 | | Problems getting appointments | Review of access and appointment system | Practice Manager and GPs | September 2014 | | Problems getting appointments | Review of telephone GP triage appointments | Practice Manager | December 2014  (action achieved July 2014) |   The actions highlighted in yellow were all taken and appointment system was changed to a GP triageing system. |
| Result of actions and impact on patients and carers (including how publicised):  The actions were publicised near the front entrance of the practice and on the patient participation board.Information from Complaints, suggestions, NHS Choices, CQC report and Healthwatch Report indicated that patients were unhappy with the new GP triaging system that was implemented and that information on the benefits of the new system was not being adequately publicised (CQC Report). The PPG decided to use their follow-up free text question on Friends & Family Test to find out more about the problem and asked “How do you feel about the change to the appointment system” so that they could monitor patient satisfaction. This started in December with the implementation of the Friends & Family Test and the first set of results was provided for their meeting in February. An updated action plan will be formulated in April 2015 as the practice has been operating without a practice manager since December 2014. The new practice manager comes into post in March 2015. |

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| Priority area 2 |
| Description of priority area:  Improve satisfaction with customer care service at reception |
| What actions were taken to address the priority?  Action 1: It was decided by the practice and discussed by PPG that all staff would attend a customer care/communications course. This has been booked for 19th March 2015.It will focus on telephone administration skills.  Action 2: The PPG volunteered to contribute to training all staff ( if informed and available ) by talking about the patients experience from their perspective. PPG members who are interested in participating were identified. Another patient who recently complained about customer care has also agreed to contribute. This is because the bespoke training focuses on asking appropriate questions on the telephone when booking appointments. |
| Result of actions and impact on patients and carers (including how publicised):  It is planned to publicise the training and contributions made by the patient group once they have taken place, in all usual places ie near front entrance and on the Patient Participation Board. This will be included on the web site... The results may be monitored by changing the additional text question on the Friends & Family Test to ask about whether or not patients have noticed any improvements in staff communication and customer care. |

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| Priority area 3 |
| Description of priority area:  To improve patient satisfaction with all processes relating to Prescriptions |
| What actions were taken to address the priority?   * The practice has now adopted electronic prescribing * The practice has adopted a dedicated prescription desk so that full attention can be given to prescription queries * Patients wanted to know why a requested medication was not prescribed. If EPS is used the practice now sends a reply to the receptionist giving the reason so that it is recorded in the patient notes |
| Result of actions and impact on patients and carers (including how publicised):   * The electronic prescription scheme is advertised in the reception area and on the website * Electronic prescribing seeks to avoid lost pieces of paper requesting meds and lost scripts * The prescription desk handles patient prescription queries and improves patient safety by ensuring patients can access their prescriptions in a timely manner ( although required patient notice period has gone from 48 hours to 72 hours ) * The dedicated prescription desk is located in reception and is well sign posted |

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 see above – (priority area one for issues regarding appointment). All actions were taken and publicised
* The following actions arising from the previous action plan were implemented and minutes of PPG meetings are publicised on the web site, and on the notice boards:

1. Prescriptions – review of online prescribing requests by practice manager – achieved and implemented
2. Referrals – notice to be displayed in all GP rooms saying that if patients have not heard back from services to which they have been referred within a set period of time, to notify the GP
3. Managing patient expectations about being kept waiting and not being seen at exact appointment time – display explanation and apology on electronic display board. Achieved
4. Out of date information displayed on notice boards in reception area.Boards are now regularly checked
5. Pass on positive feedback to staff to boost morale. Staff are regularly informed about praise and commendations received from patients
6. PPG Sign Off

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| Report signed off by PPG:  YES  Date of sign off:  17.03.15 |
| How has the practice engaged with the PPG:  The Practice has facilitated the group by providing a GP at the majority of meetings ( every meeting since April 2014), and a dedicated member of staff (Patient Participation & Complaints Manager) to facilitate the group, a meeting place, photocopies of required meeting papers, teas, coffees.A £500 allocated budget which was a legacy from when the PPG was initially established and is still available.    How has the practice made efforts to engage with seldom heard groups in the practice population?  The Practice is situated in a very diverse area which includes a huge number of ethnicities. The actions taken which have been publicised at the practice are also translated into various languages. Efforts have been made to attract young people into the PPG.    Has the practice received patient and carer feedback from a variety of sources?  Yes. The Practice has received feedback from complaints, CQC report, Healthwatch report, suggestion box, NHS Choices, and the Patient Participation Group.  Was the PPG involved in the agreement of priority areas and the resulting action plan?  The PPG chose the priority areas and contributed to formulating action plans for last year’s survey and are monitoring progress with the practice’s action plans to address the 3 priority areas.  How has the service offered to patients and carers improved as a result of the implementation of the action plan?  The actions with regards changes to the length of the phone message have generally been well received by patients, the new GP triage system has generated a lot of complaints and dissatisfaction, the prescribing changes are making the patients experience easier and the customer care action plan has yet to be implemented but I imagine it will have a productive outcome.  Do you have any other comments about the PPG or practice in relation to this area of work?  The PPG was unhappy with the way the new appointment system was introduced, especially without prior consultation about the specific changes. Once the reasons for the changes were explained to the PPG there was a better understanding for the changes following on from various funding cuts.  The PPG was unhappy with a breakdown of communications re administration and notification for PPG meetings and the former Chair of the PPG was absent due to ill health for a sustained period of time.This resulted in only three members attending meetings for over a year. These matters have now been addressed and attendance has improved.  The PPG was happy that the Practice was able to publicise and facilitate training for 3 regular members, via the Forum for Health and Wellbeing re various NHS matters including NHS structure, commissioning, patient representation etc.  The PPG was happy that a GP was present since April 2014 at each PPG meeting.  The PPG is currently redrafting its Constitution.  The PPG is hopeful that positive consultation will improve further with the Practice, that its input will be sought, so that communication with patients and the patient experience and understanding will be enhanced. |

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