

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: The St James Practice (47 St James St, London, E17 7NH)

Practice Code: F86058

Signed on behalf of practice: Dr P M Kawar

Date: 27-Mar-2015

Signed on behalf of PPG: Mr John Lampard

Date: 27-Mar-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, Email, text, website and post Other (please specify) Regular face to face meetings but also via email and telephone to group chair and secretary.																																					
Number of members of PPG: 6 board members																																					
Detail the gender mix of practice population and PPG: <table border="1" style="width: 100%; border-collapse: collapse; margin-top: 10px;"> <thead> <tr> <th style="width: 20%;">%</th> <th style="width: 30%;">Male</th> <th style="width: 30%;">Female</th> </tr> </thead> <tbody> <tr> <td>Practice</td> <td>49.5%</td> <td>50.5%</td> </tr> <tr> <td>PRG</td> <td>50%</td> <td>50%</td> </tr> </tbody> </table>	%	Male	Female	Practice	49.5%	50.5%	PRG	50%	50%	Detail of age mix of practice population and PPG: <table border="1" style="width: 100%; border-collapse: collapse; margin-top: 10px;"> <thead> <tr> <th style="width: 10%;">%</th> <th style="width: 10%;"><16</th> <th style="width: 10%;">17-24</th> <th style="width: 10%;">25-34</th> <th style="width: 10%;">35-44</th> <th style="width: 10%;">45-54</th> <th style="width: 10%;">55-64</th> <th style="width: 10%;">65-74</th> <th style="width: 10%;">> 75</th> </tr> </thead> <tbody> <tr> <td>Practice</td> <td>25.3</td> <td>9.1%</td> <td>22%</td> <td>20%</td> <td>11.8%</td> <td>6%</td> <td>2.9%</td> <td>2%</td> </tr> <tr> <td>PRG</td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td>83%</td> <td>17%</td> </tr> </tbody> </table>	%	<16	17-24	25-34	35-44	45-54	55-64	65-74	> 75	Practice	25.3	9.1%	22%	20%	11.8%	6%	2.9%	2%	PRG							83%	17%
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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	19	3	0	3794	4	100	1	2309
PRG	2							

Note: The ethnicity breakdowns above and below are in numbers not percentages as not all patient have stated ethnicity.

	Asian/Asian British					Black/African/Caribbean/Black British			Other	
	Indian	Pakistani	Bangladeshi	Chinese	Other Asian	African	Caribbean	Other Black	Arab	Any other
Practice	307	1206	147	182	646	791	591	646	2	8
PRG	1						3			

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:

The practice have regular meetings with PPG board. There regularly review the practice population and ensure that all patients have an opportunity to be part of the group or to feed their suggestions into the board meetings. We have twelve languages besides English spoken by our practice team who are able to help engage the patients and encourage their views. We have an allocated team responsible for communication with the patients that is led by our Reception Manager. All new registrations are invited to give comments and given information about the PPG. Our team target under represented populations within the practice for example gathering the views of young families at our mother and baby clinic, plus sending out questionnaire's when we send reminders for baby immunisations. We have recently done a home visit project and this helped engagement of our housebound patients.

Patients that have highlighted areas of improvement via submitting complaints have been asked whether they would consider being part of the PPG and we have forward their thoughts to the PPG. Our annual plan engages via Saturday open days, coffee mornings, flu campaigns, cultural events and meet the staff days.

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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:

- Complaints into the practice directly and via NHS England.
- Feedback from our Care Quality Commission visit/report.
- Feedback from the practice Patient Participation Group.
- Verbal feedback to doctors, nurses and reception staff.
- Feedback from our suggestion box.
- Feedback from a Health-watch Waltham Forest report after collecting patient responses about their experiences.
- Friends and Family Test feedback cards.
- NHS choices
- We have review 2013/2014 patient feedback have done a comparison in 2014/2015

How frequently were these reviewed with the PPG? (Quarterly)

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3. Action plan priority areas and implementation

Priority area 1
<p>Description of priority area:</p> <p>Condition of the St James Health Centre premises (maintained by NHS Property Services) and the lack of heating.</p>
<p>What actions <u>were</u> taken to address the priority?</p> <p>There were discussion with all concerned parties to rebuild St James Health Centre (the building in which The St James Practice is situated). Discussions got to the stage of approving architectural plans and submitting the proposal. This is still high on the agenda for 2015 as the plans and rebuild have not yet been approved.</p> <p>The chair of the PPG and the Practice Development Manager both sit on the committee that is involved in the re-development of the building.</p> <p>During 2014 we have had the local MP and Health-watch involved in our plea for the redevelopment of the building.</p> <p>We also invited CQC to do a visit at the practice and this has taken place.</p> <p>Infection Control Team has also been involved to ensure safe provision of care for patients.</p> <p>We have replaced all chairs in waiting areas and the building is starting to improve.</p>
<p>Result of actions and impact on patients and carers (including how publicised):</p> <p>All consultation rooms were refurbished including replacing the flooring and sinks and all now meet infection control standards. To resolve the matter of the lack of heating, a diesel generator has been installed to power electric heaters throughout the areas of the building that are in use. This was publicised via the PPG meeting, NHS Choices website and via Healthwatch Waltham Forest. Patients are no longer raising the issue about the lack of heating and clinical</p>

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rooms are brighter and more welcoming for patients.

There are also future plans to redevelop the reception area and improve disabled access. The long term plan is to rebuild but we are awaiting further guidance on this development.

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Priority area 2

Description of priority area:

Appointment system was not considered to effective in serving patient's needs (appointments were only bookable on the day).

What actions were taken to address the priority?

- 1) Introduced the ability to book in advance as well as retaining same day appointments for urgent medical matters.
- 2) Telephone triage system put in place for every weekday morning and afternoon.
- 3) Introduction of routine visits.

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

- 1) Patients are now able to get urgent medical attention when they need it but also book appointments around other commitments when the matters are less urgent.
- 2) Using telephone triage, patients needing medical advice can speak to a GP much quicker than having to wait for an appointment. Often the GP is able to resolve their query over the phone.
- 3) The practice always had visits in place for urgent medical problems and the local area has dedicated teams of District Nurses, Community Matrons and also a Rapid Response team to determine whether patients need admission. The introduction of routine visits allows GPs to check in on patients that may be housebound but not acutely unwell.

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Priority area 3

Description of priority area:

Communication with patients.

What actions were taken to address the priority?

The website has been updated to a layout that is more user-friendly and also has more relevant/up-to-date content on it. The practice is also actively responding to NHS Choices comments as well putting news entries on there to keep all our patients informed.

The practice has recently had a flat screen installed in the patient waiting area that will display helpful information to patients on a video loop.

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

Patients are able to be kept much more informed about changes within the practice as well the introduction of new services such as EPS (electronic prescriptions service).

We have a communication team that gathers the feedback from patients has enabled us to make prompt and effective improvements to communication.

Reception teams have been restructured, retrained and we are seeing an improvement in patient feedback.

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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):

The state of the premises has been an ongoing issue raised by the PPG members as well as patients on the whole. Progress has been made in this regard.

Access has certainly improved and we are getting more positive feedback on access to a clinician. We have recruited two new general practitioners and have expanded the nursing workforce.

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4. PPG Sign Off

Report signed off by PPG by all board of members

Yes

Date of sign off: 27.03.2015

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How has the practice engaged with the PPG?

We have two members of the practice team invited to the PPG to get information. The PPG also invite practice staff and any other relevant people to give information, feedback and make suggestions.

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

Yes the practice has engaged with the practice population via email, text feedback, suggestion boxes, home visits, patient communication, friends and family feedback, healthwatch survey and we have a communication team who get verbal feedback from patients as they come in for appointments.

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

Yes the PPG built on the previous year's feedback from patients and past survey to set the action plan for 2014/2015. The key objectives were to improve customer care, improve access to telephone appointments and access to the same day appointments. There has been a good improvement in access to appointments with the introduction of triage and a nurse practitioner service.

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

We are now seeing a lot more positive feedback from patients on access to telephone appointments and on the day emergency appointments. We are offering on average 60 more telephone appointments a day than the previous year.

The introduction regular routine home visits rather than adhoc has helping the practice engaged better with a vulnerable group of patients.

The Nurse Practitioner appointments have increased capacity for the same day services which has been welcomed by the patients.

The training of reception staff and replacing the waiting room chairs has had a positive effect on patients wellbeing.

We have had the building refurbished which has improved wellbeing and infection control standards.

We have a new computer system that allow a better method of communication with patients and staffs as well as new call systems.

The PPG have agreed to review patient feedback again in April to help shape the priorities for 2015 – 2016.

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

The PPG will continue to work on the long term development of the building as presently it is being refurbished but the long term plans are to look at a new building St James site. The chair of the PPG will remain on the building development committee.

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