

Patient Participation Enhanced Service 2015/16 Annex D: Standard Reporting Template

Kingsmead Healthcare

4 Kingsmead Way London E9 5QG

London Region North Central & East Area Team

Complete and return to: england.lon-ne-claims@nhs.net no later than 31 March 2016

Practice Name: Kingsmead Healthcare

Practice Code: F84015

Signed on behalf of practice: Dr. G.R. Ananthapadmanaban

Date: 21 March 2016

Signed on behalf of PPG: Mrs. C Mehmed

Date: 21 March 2016

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, Other (please specify)

Face-to-face

Telephone

Advertising in waiting area

Practice NHS Choices website

Practice website

Patient Newsletters

Digital Patient Call System

Notice in the Practice Leaflet

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Number of members of PPG: 11. This includes the four members of the Practice who, by ethnic origin are – 1 Irish, 2 Indian and 1 English.

Detail the gender mix of practice population and PPG:

%	Male	Female
Practice	2725	2626
PRG	6	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	1228	698	902	748	852	498	246	179
PRG			1	2	1	2	5	0

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	1347	60	0	192	107	57	29	98
PRG	1	1		1				

	Asian/Asian British					Black/African/Caribbean/Black British			Other	
	Indian	Pakistani	Bangladeshi	Chinese	Other Asian	African	Caribbean	Other Black	Arab	Any other
Practice	128	32	230	24	62	1570	1374	0	31	10
PRG	2		1		1	2	2			

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 White and Black African-Afro-Caribbean patients form 82.5% of the practice population, the remainder belonging to other and varied ethnic communities. To strike a balance between the size of the PPG and make it consistently function to a level where it

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would be a productive and enduring patient platform, the PPG decided in 2009 to have two representatives each from the dominant populace and one each from the South Asian and Kurdish-Turkish community. This decision also took into account morbidity profile which is weighted heavily in favour of the older population.

Having this selection framework in place, the Practice encourages all patients to participate in the proceedings of the PPG. We advertise for interest in our waiting area as well as through our newsletters, digital patient call system and websites. This is available in different languages.

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?

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

NO

2. Review of patient feedback

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

The Practice collected data from patients using the following channels:

- Friends & Family Feedback
- Comment Cards
- Extended Hours Feedback
- Suggestion Box
- Patient websites

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- Patient Complaints – verbal and written
- PPG Meetings & Feedback
- Verbal and written feedback from patients to any member of the Practice team

How frequently were these reviewed with the PRG?

Feedback data is collated and presented to the PPG collective on a quarterly basis.

3. Action plan priority areas and implementation

Priority area 1

Online Booking of Clinical Appointments

What actions were taken to address the priority?

It was agreed with the PPG that all members of the Practice team and the PPG would encourage as many patients as possible to sign on for the online booking of clinical appointments. This would in turn reduce the workload of reception staff both for making new as well as review appointments. Patients are being encouraged to sign on by reception staff both verbally and through posters in the waiting area, the Practice leaflet, advertising in the newsletters and through the two websites.

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

The PPG and the Practice team feel that this priority should be ongoing and the advertising for improving access should be encouraged at all times. So far some 32 patients have signed on for the service.

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Priority area 2

Management of Telephone Requests for Repeat Prescriptions

What actions were taken to address the priority?

Both patients and Practice staff have consistently complained that the telephone line was made busier by patients phoning at all hours to request repeat prescriptions. The resultant delay in getting through was resulting in some patients becoming irate and railing at staff members. The Practice team therefore decided to address the problem as a priority. Following discussions with the PPG, the telephone system firm was contacted. A message was composed collaboratively with the PPG and inserted into the pre-recorded slot as first message to be played when a patient rings. The message stated that all requests for repeat prescriptions would no longer be taken over the telephone unless the patient was designated on the Practice database as housebound.

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

After a month's notice of this message being played to all those who rang the Practice, the new policy began to be implemented from 23 February 2016. There were some initial complaints from a small minority of patients (largely as it inconvenienced them) but the new policy has been received very well by all types of patients and carers.

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Priority area 3

Management of Well Baby Clinic

What actions were taken to address the priority?

The PPG and the Practice team, especially those directly involved in the delivery of the Well Baby clinic, felt strongly that the structure of the clinic was creating a lot of stress for both clinical staff who were working no stop for over three hours immunising babies and carrying out well baby examinations. The pressure on this clinic, which has an open appointment structure, has been increasing for the last six months as the local community baby clinics shut down one by one.

All agreed that it was no longer possible to conduct the clinic in the open structure way, especially as the Practice has signed on for being a BCG Hub Practice. It was agreed that:

- An appointment system would be introduced between 10.30 and 1.00 PM on Tuesday morning for immunisations and checks by the Practice team – GP and Nurse
- Those wishing to see the HV team could still come in without an appointment
- The Practice Nurse would offer immunisations during her normal working hours as well.

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

The change is currently being implemented and all patients attending baby clinics are being advised in writing of the changes. Parents will be able to book such appointments online as well. The change has been welcomed by parents, who have had to wait sometimes up to two hours to see the HV and then the Nurse-GP.

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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):

1. Notable past achievements – Recruitment of a female GP; new telephone system; completely refurbished Practice; new Patient Arrival system; Extension of Opening Hours; Digital Envisage Patient Call and Advertising System; new Practice website in addition to NHS Choices one; Excellent feedback from the FFT every month.
2. Six-monthly newsletters now four monthly - ongoing
3. Advertise and encourage more and more patients to use the practice website for information-ongoing
4. Implement strategies to encourage patients to use online services such as repeat medication, making appointments and viewing sections of their medical records - ongoing
5. Proposal for PPG meetings to be held as an open forum – 2016 onwards
6. Monitoring waiting times to improve patient experience – 2016 onwards
7. Encourage patients to share email address – 2016 onwards
8. Encourage patients to get screened for diabetes and hypertension – 2016 onwards
9. Monitor quarterly the quality of privacy on offer to patients in all parts of the Practice.
10. Focus on signing up younger (<40) patients to the PPG.

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4. PPG Sign Off

Report signed off by PPG:

YES

Date of sign off: 21.03.2016

How has the practice engaged with the PPG:

Although the Practice PPG meets once a quarter, we encourage the representatives to act as councillors for the patients. If they have any concerns or wish to raise a query, they have access to the Practice team at all times. Additionally, the meetings serve as a comprehensive forum for all patient-related services and all patients are encouraged to provide feedback.

- Face to face meetings
- Telephone as and when appropriate

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

All patients are made aware that they should not hesitate to contact the Practice as there is access to interpreter service. The Practice leaflet also carries relevant information. In a Practice which has a significant variety of ethnicities in very small numbers, staff members speak several of the languages spoken by the minority which is a welcome facility and they are regularly engaged by patients (e.g. Vietnamese, Hindi, Urdu, Arabic, Punjabi). Such patients are encouraged by staff and GPs to engage with the Practice to meet their clinical and social needs.

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

The Practice continually gets feedback from patients and carers, formally through the GP consultation skills audits and the FFT as well as through verbal or written complaints or positive comments. There is a suggestion box in the waiting area. Clinicians are

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now more directly engaged with carers as a result of the Avoiding Unplanned Admissions service and the creation and update of care plans which provides the platform for continuing engagement between carers and clinicians.

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

All the priority items proposed, agreed-actioned and implemented upon were first raised by the PPG, discussed and finalised on the same forum. The Practice takes the views of the PPG seriously as they reflect the views and needs of the patients.

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

The Kingsmead PPG has had a very productive year as its work has been mostly about increasing patient choice. The Practice now has a female GP who not only provides clinical services but also increases the choice patients, especially female patients, have in engaging with the Practice. The new telephone system also provides the platform for better engagement with the Practice's services in that it has call sequencing, information about different types of consultation choices patients have and which also improves the efficiency of frontline staff in helping streamline their work. Similarly, the flooring of the entire clinical area in the Practice has been upgraded to meet CQC standards. In its own way, it has changed the perception of the work environment for staff and made it more welcoming for patients.

The PPG engaged actively during the CQC inspection and the feedback from the inspection team was very praiseworthy.

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

Generally, the PPG method of engagement with patients has turned out to be a mutually satisfactory approach as the work it does benefits both patients and the Practice. However, there is a lot more scope for a higher level of engagement with patients in trying to improve the health of patients, mainly through education and encouragement, which the PPG can help deliver through patient champions. The focus of its work in the coming year will be on this aspect of health promotion.

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