

**Patient Participation Enhanced Service 2014/15 Annex D: Standard Reporting Template**

London Region South London Area Team

Complete and return to: [nhs.cb.lon-sth-pcc@nhs.net](mailto:nhs.cb.lon-sth-pcc@nhs.net) by no later than 31 March 2015

Practice Name: Drs P T Hudson and partners

Practice Code: H84017

Signed on behalf of practice: 

Date: 25/3/15

Signed on behalf of PPG: 

Date: 25/3/15

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, Email and letter when appropriate

Number of members of PPG: 16

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Detail the gender mix of practice population and PPG:

%	Male	Female
Practice	49	51
PRG	44	56

Detail of age mix of practice population and PPG:

%	<16	17-24	25-34	35-44	45-54	55-64	65-74	> 75
Practice	20	10	13	17	15	10	8	7
PRG		6	12	19		19	19	25

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	7419	214		3063	51	234	30	202
PRG	12			1				

	Asian/Asian British					Black/African/Caribbean/Black British			Other	
	Indian	Pakistani	Bangladeshi	Chinese	Other Asian	African	Caribbean	Other Black	Arab	Any other
Practice	252	73	33	138	435	234	33	34	9	1179
PRG					1	1				1

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 GPs explain the role of the PPG when visiting house – bound patients and those in a Care and Residential home for people with learning difficulties, and ensures patients understand they are not disadvantaged by not attending meetings as we communicate also by telephone, letter and email. Patients are also invited to join the group at new patient check or at consultation. The practice displays leaflets in reception and the receptionists often invite patients to join the group. We also ensure that posters are clearly visible in the room used by the health visitor and midwife. Additionally the practice nurse has begun to advertise the PPG at appointments for travel vaccinations. The practice has a good understanding of its patient population in terms of demographics and ethnicity and is proactively continuing in our efforts to improve our representation in certain areas.

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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: Healthwatch Enter and Review reports, Practice suggestion box, FFT, ad hoc comments from patients and staff

All comments are also reviewed by the whole practice team as well as our patient representatives

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How frequently were these reviewed with the PRG? Agreed intervals throughout the year and at specific times, for example the publishing of the Healthwatch Enter and View reports

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### 3. Action plan priority areas and implementation

#### Priority area 1

##### Description of priority area:

Complete Seymour House refurbishments to the direct benefit of our patients  
Practice cleanliness/minor works

##### What actions were taken to address the priority?

At Seymour House the automated entrance door and patient lift are now in place and the reception refurbishments completed.

The practice has now engaged a handy man at both surgeries. Minor works are now logged in a book and signed when completed in order to keep a check on the time delay.

At Seymour house we gave notice to our previous cleaning company and have now engaged a cleaner with an improved cleaning schedule and specification.

The water cooler has been removed from the waiting room as a result of discussion with the PPG. Unfortunately this had proved a hazard as was played with by children and water constantly spilt on the floor was an unacceptable risk.

At our Lock Road surgery the condition of entrance slip road, although not the property of the practice, is a cause for concern. It has proved difficult in the past to confirm exact ownership. With the help of one of the members of our PPG we have now just established ownership and have a clearer way forward by which to achieve improvement.

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

The automated entrance door at Seymour House has been universally welcomed by our patients and we have received many appreciative comments. It is of particular benefit to wheelchair users and those with prams/pushchairs who have been highly satisfied with this improvement.

There has been an immediate result as regards the cleanliness of Seymour House, which although not specifically commented upon is evident to us all.

Minor works have been completed promptly, thus minimising the inconvenience to patients.

The PPG have been kept up to date throughout the year with the improvements and the wider patient population advised of the changed cleaning arrangements and the appointment of a handyman by means of a poster.

Flier information taken to nursing and residential homes.

Our Ham patients have been advised of the progress regarding improvement to the slip road by a poster in the waiting room.

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### Priority area 2

#### Description of priority area:

Internal patient healthcare information– including other languages,  
Improved information regarding services provided by the surgery  
Improved signage re opening times of the surgery

#### What actions were taken to address the priority?

The practice has added to and improved both healthcare and surgery specific information provided at both surgeries. Leaflets are now stored predominantly in clear plastic containers, for ease of cleaning. A poster is displayed advising patients of the availability of information in different languages. A thorough review of all paper information was conducted in 2014, updated issues of leaflets were ordered, unnecessary or outdated information removed and new material ordered. Larger and more effective display boards were purchased for both surgeries and the nurses at the Ham surgery promoted a different health topic as a monthly theme. Notices regarding surgery services and information were displayed separately for ease of reading and the breadth of patient surgery information was increased.

The opening times of the surgery are now more clearly displayed internally at both surgeries, including our increase in Friday opening hours until 6pm. The practice website has been altered accordingly. The practice has received favourable comments from patients who find this extended opening very convenient.

Due to the refurbishment at Seymour House the external sign displaying opening times had to be removed. This has now been re-designed prior to being replaced.

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

Progress has been reported to PPG throughout the year and publicised on the surgery website and by way of the self-evident posters. Additionally we are asking our patients and carers at reception whether they feel they have the information, both healthcare and regarding the surgery's services and opening times, they require.

The extension of our opening hours to 6pm on Friday was agreed with PPG.

Fliers containing pertinent surgery information are available to take to those who are unable to visit the surgery.



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### Priority area 3

#### Description of priority area:

Review of appointment availability Clear information re appointment access and OOH services

#### What actions were taken to address the priority?

We piloted an internal appointment arrangement at Lock Road, whereas a doctor is left almost un-booked each day. This has improved the daily flow of appointments and we now plan to continue this arrangement. At Seymour House we trialled a system of leaving appointments at the beginning and end of each day to be available to book in advance. This again proved most satisfactory and was welcomed by our patients.

We advised our patients on the alternative methods of making an appointment by means of clearer and more visible displayed information, in person at the reception desk and on our surgery website. This included our Saturday morning extended hours. As well as the ability to book in person, on telephone, when the surgery is closed using our Patient Partner automated system, the practice had relatively recently introduced on line booking. We proactively advertised our on line booking throughout 2014 and the uptake amongst our patients has subsequently increased.

We have also displayed improved information on how to contact a doctor out of hours and the role of 111; particularly important due to the change in Out of Hours provider in 2014.

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

Throughout the year we have kept the PPG advised of our progress. The improved waiting room notices have been self-evident to patients, although we also have paper information to take to those who are house bound and in a nursing or care home. This entire report will be published on our website, in reception and be available in hard copy at reception and taken to residential homes.

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):

Our 2013/2014 action plans concerned the following issues

**Proportion of same day/book in advance appointments:-** We are pleased to report that our current appointment ratio is proving satisfactory. A recent Health Watch survey reported that 'the majority of patients told us that they could always get appointments when they needed them'. We made adjustments on a weekly basis in accordance with the current demand. We also ensured we always had an adequate number of pre-bookable appointments available by extending clinics where possible.

**Method of booking appointment:-** We continued to review our Patient Partner automated booking, including liaison with BT regarding the initial set up which had caused problems for some patients when dialling in to the surgery. We have continued to advertise our on – line booking facility which is now used by a good number of our patients. As we have discussed with our PPG we are imminently upgrading our computer system. When this has taken place we will further advertise our line booking facility as the functionality will be more robust.

**Practice Opening times:-** We have extended our opening times to 6pm on Friday this year and as a direct result of patient preference we have continued with our Saturday surgeries which prove most convenient to our patients. Additionally we now often have two nursing staff on duty to increase the availability of nursing appointments for our patients.

**Telephone Triage:-** During the year we have further extended our morning triage availability to meet demand, firstly on Monday and Friday and latterly every day of the week. This addition has proved of great benefit to our patients.

**Practice Premises:-** At Seymour House the automated entrance door and patient list are now installed and our reception refurbishments completed. There had been a delay in the automated door at Lock road, due to the suitability of the entrance lay out. However this has now been overcome.

**Surgery Website:-** We have continued to work on our surgery website to ensure it is of the greatest value to our patients as possible

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4. PPG Sign Off

*Greer Helen Howell*

Report signed off by PPG:

YES

Date of sign off: 24<sup>th</sup> 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?

*YES*

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

*YES*

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

*YES*

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

*See report above*

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

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