

Annex D: Standard Reporting Template

London Region [North Central & East/North West/South London] Area Team  
2018-19 Patient Participation Enhanced Service – Reporting Template

Practice Name: Island Medical Centre

Practice Code: F84647

Signed on behalf of practice:



Date: 19.3.2019

Signed on behalf of PPG:



Date: 19.3.2019

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

Does the Practice have a PPG? **YES**

Method of engagement with PPG: **The Practice engaged with the PPG via the following methods- face to face meetings at the practice, email, text and surveys.**

Number of members of PPG: 31

Detail the gender mix of practice population and PPG:

%	Male	Female
<b>Practice</b>	<b>4405</b>	<b>4094</b>
<b>PRG</b>	<b>9</b>	<b>21</b>

Detail of age mix of practice population and PPG:

%	<16	17-24	25-34	35-44	45-54	55-64	65-74	> 75
<b>Practice</b>	<b>0</b>	<b>778</b>	<b>3223</b>	<b>1798</b>	<b>724</b>	<b>360</b>	<b>168</b>	<b>122</b>
<b>PRG</b>	<b>0</b>	<b>0</b>	<b>1</b>	<b>3</b>	<b>6</b>	<b>4</b>	<b>6</b>	<b>7</b>

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
<b>Practice</b>	<b>615</b>	<b>13</b>	<b>1</b>	<b>2029</b>	<b>36</b>	<b>31</b>	<b>50</b>	<b>382</b>
<b>prg</b>	<b>11</b>	<b>1</b>	<b>0</b>	<b>0</b>	<b>1</b>	<b>1</b>	<b>0</b>	<b>0</b>

	Asian/Asian British					Black/African/Caribbean/Black British			Other	
	Indian	Pakistani	Bangladeshi	Chinese	Other Asian	African	Caribbean	Other Black	Arab	Any other
<b>Practice</b>	<b>666</b>	<b>94</b>	<b>1303</b>	<b>620</b>		<b>203</b>	<b>61</b>	<b>102</b>	<b>32</b>	
<b>PRG</b>	<b>1</b>	<b>1</b>	<b>8</b>	<b>1</b>	<b>1</b>	<b>0</b>	<b>1</b>	<b>1</b>	<b>0</b>	

**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:**

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The practice has a very active PPG . To ensure that patients are representative from our practice population the practice uses the following methods to engage and communicate with patients:-

Methods used to Invite patients to join the PPG 1) face to face 2) letter 3) patient board 4) posters 5) practice website 6) Digital information screen .

**Are there any specific characteristics of your practice population which means that other groups should be included in the PPG?**

No

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:*

*Ipsos Mori Survey – Yearly*

*Friends & Family Test Surveys feedback – Quarterly via leaflet*

*Complaints – Yearly*

*NHS choices- Quarterly*

*PPG run Charity Event – a new suggestion form the PPG*

***How frequently were these reviewed with the PRG?***

*The above information has been shared with the PPG on these dates. 15.05.2018 / 30.10.2018/ 28/12/18 /26/02/19*

## 3. Action plan priority areas and implementation

### Priority area 1

**Description of priority area:**

- **Building Capacity**

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

<i>Priority Area</i>	<i>Actions</i>	<i>Who does this?</i>	<i>Deadline</i>
<p>One of the priority areas raised by the PPG back in 2016 was that of limited building capacity.</p> <p>The refurbishment plans were temporarily put on hold due to the council elections.</p> <p>The council had reservations providing funding for a building that is privately owned.</p>	<p>Throughout the year developments and negotiations took place and we were informed funding had been approved.</p>	<p>CEO for the Hurley (RB)</p>	<p>ongoing</p>
<p>As of yet there is still no start date for the restructuring works to commence. The practice continues to provide updates to the PPG at every meeting.</p>	<p>During the interim period works were carried out in order for the practice to continue to meet Health and Safety standards and to remain operational.</p> <ul style="list-style-type: none"> <li>• The roof was repaired to prevent further water damage.</li> <li>• The flat was cleared out and is still drying.</li> <li>• The main office carpet was disposed of and new flooring laid.</li> </ul>	<p>Manager</p> <p>Manager</p>	<p>Ongoing</p>

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

Updates were provided via the PPG meetings. Information was also available on the patient forum board in the practice. The practice continues to maximise clinical capacity by maintaining a clinical room rota spreadsheet. Due to the lack of clinical space all users including external ones have to be assigned clinical space and time slots. The space for the administration team has also been exceeded and staff are required to hot desk. Once the building works are completed there will be ample room to accommodate all users. Despite this there are no known disadvantages to the patients or carers as of yet.

## Priority Area 2

### Description of priority area:

Internal Electronic Communications Board

What actions were taken to address the priority?

<i>Priority Area</i>	<i>Actions</i>	<i>Who does this?</i>	<i>Deadline</i>
<p>The PPG felt that the electronic communications board was a primarily tool designed to provide direct communication from clinician to patient. They felt that it not only acts as a call in system but also confirmed it to be a fundamental communication tool. Sharing changes, updates, awareness of support groups and other essential information to the wider practice population.</p> <p>The PPG wanted to make this a priority to area.</p> <p>The Director of Operations at the Hurley explained back in February 2016 that she would look into seeing if the CCG could fund a self-check in system and a TV call in option.</p> <p>Authorisation to purchase a call in system was given in February 2018.</p>	<p>PM made the Hurley aware of this issue and initially looked at fixing the LED board. Due to its age it was not economical to fix.</p> <p>The Director of operations was invited to the PPG meeting back in 2016 to advise further on this matter. Senior business manager in the process of purchasing</p> <p>This was taken to the PPG meeting in May 2018</p> <p>The practice installed a Digital call in system in October 2018. This information was taken to the PPG meeting on 30.10.2018.</p>	<p>PM</p> <p>KB &amp; SB</p> <p>KB</p> <p>KB</p>	<p>Take to PPG meeting on 20.09.2017 July 2017</p> <p>Taken to PPG meeting in May 2018</p> <p>Taken to PPG meeting on 30.10.2018.</p>

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

*There has been a positive impact on patients and carers as 1) the system provides a wide range of local health service information 2) will prevent patients from presenting to the wrong room/clinician.*

## Priority area 3

### Description of priority area:

A new telephone system pending more lines and a queuing system / **self-arrival system**

What actions were taken to address the priority?

<i>Priority Area</i>	<i>Actions</i>	<i>Who does this?</i>	<i>Deadline</i>
<p>Due to the planned practice restructuring work the PPG <i>again requested</i> for the <i>telephone queueing system</i> and more lines to be installed. They said that this would lead to a better patient experience, as longer waiting times led to increasing dissatisfaction and frustration with accessing services. They asked for a system that would be able to estimate the patients waiting time in the call queue. However, by increasing consultation rooms the practice would require a more advanced telephone operating system to support this. This would be taken forward as a priority within the redevelopment works.</p>	<p>The practice did not receive the go ahead for the restructuring plans during 2018/2019 due to the council elections. Part of the redevelopment plans include for a whole new telephone system for the practice. Therefore this can only be sought after the works commence.</p>	<p>CEO at the Hurley</p>	<p>Ongoing</p>
<p>The PPG agreed to explore another area of service; that of the self-arrival system. This would also be a vital piece of equipment that would benefit the practice.</p>	<p>Director of Operations at the Hurley explained in February 2016 that she would look into seeing if the CCG could fund a self-check in system as well as a TV calling system. Approval for this was granted in February 2018.</p>	<p>Senior business manager in the process of purchasing</p>	<p>ongoing</p>
	<p>This was delivered and installed in October 2018.</p>	<p>Hurley</p>	<p>October 2018</p>

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

The PPG would like the practice to ensure they secure additional telephone lines and a new system as discussed in light of patient needs at the PPG meetings.

Regarding the self-check in arrival service this has been positively received by patients and carers. This allows patients to book themselves in for their appointments and notifies them as to which doctor or nurse they are seeing on the day and at the same time they are able to confirm their personal demographics. Receptionists have demonstrated how to use the machine so that patients who are reluctant to try it can be supported.

Another positive has been that the self- arrival check in service has reduced the queue of patients waiting at the reception entrance allowing the staff to action other matters for patients.

Patients were notified regarding the self- check in service by the PPG meetings and via the patient forum board.

## Progress on previous years

If you have participated in this scheme for more than one year, outline progress made on issues raised in the previous year(s):

Priority Area	What action has been taken?	Who is responsible for this?	What action still needs to be taken?	Deadline
<p><b>Regular GP</b> This issue was carried over from the previous four years findings of concerns raised by the PPG. The practice list size continues to grow. This in turn means that there are more positions available for regular doctors.</p>	<p>The practice has established good relationships with the sessional doctors. So although the practice has not been able to secure regular doctors they have been able to secure regular shifts with these sessional doctors on a weekly basis. This has worked out very well as the patients survey often praise the sessional doctors who regularly work at the practice. This enables the patients to maintain continuity of care with doctors who are involved in their health care .</p>	<p>PM LEAD GP</p>	<p>To try to recruit a regular GP when necessary</p>	<p>ongoing</p>
<p><b>Regular Nurse Availability</b> As in previous years, the PPG wanted the practice to spread nursing capacity throughout the whole week.</p>	<p>Due to the closure of a local practice the practice employed a permanent Nurse in March 2018.This Nurse works three days a week. The practice also retains two other nurses and a high end nurse bringing the total number of Nurses to four. Therefore the practice is able to provide access to a nurse on six days a week. This is an improvement from previous years and allows the practice to provide the maximum nursing to our growing practice population.</p>			

4. PPG Sign Off

Report signed off by PPG: **YES**

Date of sign off: 19.3.2019

PPG Chair Dr E Burden

How has the practice engaged with the PPG:

The various methods have been used to engage patients to join the PPG such as :- 1) face to face 2) letter 3) patient board 4) posters 5) advertisements and by referral from reception and GP .

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 year end poster "You said We did."

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

NO

PPG 2018/19 minutes available upon request.