Practice Name: Goodmayes Medical Practice

Signed on behalf of practice: Perri Mansaray P.L. Mansaray

Practice Code: F86034

London Region North Central & East Area Team

Complete and return to: england.lon-ne-claims@nhs.net no later than 31 March 2015

Signed on behalf of PPG: Howard CLARKE - Date: 26.2.15	
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 meetings and Email as required. PPG members not on email – agenda and minutes are posted out to them. The Assistant Manager liatelephone and letter with them.	ises via
Number of members of PPG: 18	

Date: 20.3.15

Detail the gender mix of practice population and PPG:

%	Male	Female
Practice	2805	2715
PRG	6	12

Detail of age mix of practice population and PPG:

%	<16	17-24	25-34	35-44	45-54	55-64	65-74	> 75
Practice	1296	387	809	681	529	423	262	206
PRG	0	0	0	5	5	2	3	3

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	1346	22	0	59	15	9	9	0		
PRG	10	0	0	0	1	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	941	706	444	28	0	264	182	0	10	14
PRG	6	0	0	0	0	1	0	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:

We actively advertise for new members to join our PPG, in the patient leaflet, on our website (www.goodmayesmedicalpractice.co.uk) {type address directly into top browser, do not google}, PPG newsletter, MyhealthLondon website, Jayex board, and notices in our reception area. Our current members and our doctors encourage patients to participate. Any interested party, we notify to our PPG Chair, who follows on from there and invites them to our next meeting. We do try and target minority ethnic groups and patients from our LGBT community. Main declining factors are working full time away from the area and not being able to give the regular commitment.

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 We try and encourage recruitment from our ethnic minority and LGBT groups.

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:

- Reviews following comments posted on NHS Choices.
- Issues raised at our PPG meetings.
- · Issues following on from last year's patient survey
- Reviews following patient complaints.
- Feedback from FFT

How frequently were these reviewed with the PRG?

They are discussed at our bimonthly/quarterly PPG meetings. Please see minutes attached.

3. Action plan priority areas and implementation

Priority area 1

Description of priority area:

Improve patients' ability to get a GP appointment at short notice.

What actions were taken to address the priority?

We have a number of "on the day appointments" for each doctor morning and afternoon.

Telephone triage put in place – educating patients regarding this service. GP's can offer on the day appointments to suit both the doctor and the patient if there is a clinical need.

If a patient genuinely needs to be seen, the doctors will always fit them in as an extra.

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

Patients are advised to call morning and afternoon for "on the day appointments" if their need is urgent, and the telephone triage service ensures patients are able to at least discuss their problems the same day with a GP and can be offered an appointment if necessary. The impact on patients is that it reduces the patient's need to attend A&E.

Telephone triage service has been publicised on our Jayex board, in our practice leaflet, posters in the waiting room and on our website (www.goodmayesmedicalpractice.co.uk) {type directly into top browser do not google}.

We have received very positive feedback regarding this service via the PPG and also on the FFT forms.

Priority area 2

Description of priority area:

Improve flexibility on GP appointments with longer evenings and weekend appointments.

What actions were taken to address the priority?

Dr Razack has been providing an 8.30 am clinic to provide early appointments for the workers. This has been successful. On discussion with Dr Razack, he is now willing to provide appointments from 8am. These have now been set up on our system.

Dr Patel provides appointments after 6 if the patient requests at telephone triage.

We do not provide Extended Hours so we are closed on the weekends with no plans to open currently.

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

The 8.30 am appointments have been popular and well utilised. We have now implemented an earlier start at 8 am and appointments are now available on a Wednesday and a Friday, both bookable by reception and by on line access (see screen prints attached). We have publicised these early appointments via a poster in the waiting room and on our website. At our last PRG meeting, the PRG were delighted that these appointments were now available. The impact on patients is that these early morning appointments have been made available to be of particular assistance to those patients who are working.

Redbridge CCG now provide a Health Hub via 111 for our patients in the weekday evenings (6.30 – 10 pm) and at weekends. A lot of our patients, when offered the Health Hub appointments, refuse them as they are unwilling to travel to Newbury Park for these appointments.

All appointments can be viewed on our on line access system.

Priority area 3

Description of priority area:

Improve GP communication with the Pharmacy so that repeat prescription items do not get removed without informing the patient first.

What actions were taken to address the priority?

The GP's have a good rapport with both Chief Pharmacists at both our local Pharmacies – Edens and Lloyds. Dr Patel rings them especially following discharge and lets them know changes in medication.

Now that we participate in electronic prescribing – difficult to get a message to patient. Staff are encouraged to print off a paper prescription so that they can attach a message for the patient. Alerts and messages in the patients consultation are also put in case of query. Some medications we have to change and provide alternatives by Redbridge CCG. If medicines are changed following a patients' discharge, then our staff always update the Pharmacy by telephone and attach a copy of the discharge summary.

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

We have to change some medications as per CCG guidelines. A message is always put in the patient's file. Staff are advised to print a paper prescription and attach a message for the patient.

Staff have been reminded to send a text message to the patient or to call, in the event of medication changes. We have set up a meeting with both Pharmacists to address the EPS issues. Impact on patients/carers is that any future changes to their medications will be communicated to them promptly. The PRG were happy with this resolution at the last meeting.

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) New phone system introduced with a local rate number (0203 668 7499). This is on a pyramid system so the patient does not receive an engaged tone at the other end. Calls are dealt with more thoroughly and patients can get through easily.
- 2) PPG produced a Newsletter with helpful patient education and guidance.
- 3) Monitoring of appointment availability August 2014 Practice now has Dr Razack who provides additional appointments on a Monday, Tuesday, Wednesday and Friday.
- 4) Telephone triage working well we have had very positive feedback via the PPG and on FFT.
- 5) Appointment on line access very popular. Can usually get a much quicker appointment booked on line. We had the highest take up for on line access in Redbridge last year.
- 6) Opening the Surgery on a Thursday afternoon and a Saturday This is still not available yet.

This report has been published to our website (www.goodmayesmedicalpractice.co.uk) {type address directly into top web browser, do not google}, a laminated copy is on display in our waiting room, report was discussed with our last PRG meeting and has been disseminated to the PRG members via email. Carol Hogg at Redbridge CCG also has been emailed a copy. Healthwatch Redbridge has been emailed a copy. We have sent a copy to Redbridge CVS (Community Volunteer Service) and the local Community Centre @ 616b Green Lane.

FFT comments made anonymously on the cards, are published monthly in our waiting room.

4. PPG Sign Off

Report signed off by PPG:

HOWARD CLARKE MELVILLE

YES

Date of sign off: 26.2.15

How has the practice engaged with the PPG: 2-3 monthly meetings + regular email contact with the Chair

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? Yes — Be observed.

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

between Prior Practice Steff. Prior concerns are always discussed

there exists the provide particle.

Complete and return to: england.lon-ne-claims@nhs.net no later than 31 March 2015