

PATIENT PARTICIPATION

DES- REPORT

F 85675



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Key objectives

The purpose of the Patient Participation DES is to ensure that patients are involved in decisions about the range and quality of services provided and, over time, commissioned by their practice. It aims to encourage and reward practices for routinely asking for and acting on the views of their patients. This includes patients being involved in decisions that lead to changes to the services their practice provides or commissions, either directly or in its capacity as gatekeeper to other services. The DES aims to promote the proactive engagement of patients through the use of effective Patient Reference Groups (PRGs) and to seek views from practice patients through the use of a local practice survey. The outcomes of the engagement and the views of patients are to be published on the practice website.

One aspect that our practice wish to focus on is excellent access into the practice, and also from the practice to other services in our role as coordinator of care, facilitating access to other health and social care providers.

Access has many dimensions; the relative importance of these will vary according to the specific needs of our registered population.

These dimensions include:

- **lists being open to all**
- **hours of opening with the ability to be seen urgently when clinically necessary, as well as the ability to book ahead**
- **continuity of care**
- **range of skills available – access to different professionals**
- **a choice of modes of contact, which currently includes face-to-face, phone and electronic contact but can be developed further as technology allows**
- **geographical access, enabling care as close to home as possible.**

Implementing the Patient Participation Directed Enhanced Service under the DES Directions



PATIENT PARTICIPATION GROUP- PROGRESS REPORT

PRG/PPG2011/12 Key findings & comments	PRG/PPG2012/13 Subjects discussed & findings	What are we proposing to our PPG For the future?
<p>Introduction</p> <p>We had a very successful PPG with active engagement last year via email and in meetings A full survey was carried out and all the answers were analysed , the findings were presented to PRG/PPG and Actions followed on the key findings and suggestions See attached document for details</p>	<p>Introduction</p> <p>We met twice and communicated with our members verbally and electronically since March 2012. The same questionnaire with some modifications as agreed with the group was given to our patients – results were studied and comparatively analysed report was shared with our PRG/PPG See attached document for details</p>	<p>Introduction</p> <p>We suggested the following for implementation in the next 12 months with the advent of</p> <ol style="list-style-type: none"> 1) switch of Emis PCS to EmisWeb 2) meeting CQC standards 3) change from PCT to CCG 4) new PMS contract 5) key performance indicators (kpi)
<p>Access</p> <p>Access via telephone to the surgery was of prime concern.</p> <p>Lack of 'slots' for consultation especially with female doctor and nurse were noted</p> <p>Many of the responders were concerned that ALEXANDRA SURGERY STAFF were continuously pressurising some of the patients, who attended ACCIDENT AND EMERGENCY services in hospitals, to not go there but to use HARMONI, our out of hours GP service.</p> <p>They stated that they found it difficult to communicate with staff at the HARMONI switchboard in ENGLISH, hence they chose to go to A&E during out of hours.</p> <p>Access to the practice for advice has been increased By introducing:</p> <p>EXTRA TELEPHONE LINES from 2 to 6 where 4 mobiles phones are now used by the practice to allow patients to access the surgery easily.</p> <p>'Telephone call back' service was created in order to respond to telephone messages received by our reception staff from patients on a daily basis.</p> <p>More Telephone consultations have been introduced in response to the survey and PRG group regarding access. The daily telephone consultations have increased by 80%.</p>	<p>Access</p> <p>All the members present were pleased about the improvement in access for medical advice A doctor and Nurse working on Saturdays have been introduced to enable working population to access services Saturday surgeries are very popular. 3 patients have requested Sunday opening!!</p> <p>We have also abolished the longstanding Half Day closure on Wednesday afternoon. The surgery is now open fully five days a week from Monday to Friday. The new opening hours have been updated on our surgery notices, practice leaflet and website www.alexandrasurgery.com.</p> <p>All the members who cannot speak English well were unhappy with inability to speak to the call handlers in their language and were saying it is the main reason that they were seeking face to face consultation via A&E</p> <p>Most members were pleased with the surgery staff communicating with them by mobile.</p> <p>We informed members that we will be changing to EMIS WEB We urged all to give consent to receiving SMS text – two members were concerned about confidentiality</p>	<p>Access</p> <p>All calls for non emergencies and OOHS will be via telephone number 111.</p> <p>We have changed our IT system to EMIS WEB and we hope to introduce the following :</p> <ul style="list-style-type: none"> • Plan to configure access slots especially in the morning surgeries to allow for a limited number of booking on line – we are proposing to do it as a pilot first • Send text messages to patients to remind about appointments and to inform of pathology lab results; additionally to relay messages of urgent significance from time to time. <p>We shall promote self-referral for Hospital Ante-natal care at the two maternity units most widely used by our local community. Full instructions and registration forms will be accessed via our website www.alexandrasurgery.com</p>

<p style="text-align: center;">PRG/PPG2011/12 key findings & comments Doctors - Staff - duties – training</p>	<p style="text-align: center;">PRG/PPG2012/13 key findings & comments Doctors - Staff - duties – training</p>	<p style="text-align: center;">PRG/PPG - PROPOSAL FOR THE FUTURE Doctors -Staff- duties – training</p>
<p>A doctor and Nurse working on Saturdays have been introduced to enable working population to access services.</p> <p>We have recruited extra staff who speak the following languages- TAMIL, TURKISH. BENGALI. NEPALI AND POLISH to enable culturally sensitive dialogue</p>	<p>They were happy with the new lady doctor as partner who joined us in March 2012. We have trained all staff who speak the following languages- BENGALI, CHINESE, NEPALI, POLISH, TAMIL & TURKISH. to enable culturally sensitive dialogue</p> <p>All were made aware that we are training all our staff as health officers to promote health and to monitor chronic diseases and support them in the language of one’s individual choice</p>	<p>Our practice team includes staff who speak 6 different languages. We are introducing them to the relevant language speaking patients; a database is created to communicate with them proactively to encourage use of NHS services appropriately.</p> <p>The practice is also working to collect or produce health information leaflets in other languages. These will be available from our website.</p>
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<p>Our new doctor with special interest in palliative care to take care on a day to day basis the welfare of terminally ill patients</p> <p>Our new lady doctor with FAMILY PLANNING CERTIFICATE from the Faculty of Family Planning of the ROYAL COLLEGE OF OBSTRETICS AND GYNAECOLOGY will in future expand the services to meet the wider choice in family planning as requested by women needing contraceptive services</p> <p>Restrictions on medication prescribing like Sleeping tablets including diazepam, antibiotics, Viagra, were highlighted in the survey and in PRG group discussions.</p> <p>We explained to them the need for evidence based medicine and cost effective prescribing.</p>	<p>1) All were happy about our service for the very vulnerable patients, especially the patients needing palliative care. Our regular meetings and dialogue with families and health and social care professionals are both useful and very productive in improving care of the very vulnerable patients</p> <p>2) DR. ATHEE SIVANANTHAN has started providing comprehensive family planning services and our LARCS uptake has increased by 18%</p> <p>We shared the progress we have made regarding the following: Smoking cessation is improving Sleeping tablet usage has been reduced by 33% We said that we are still struggling with over use of antibiotics against expert advice Most of the PPG members present AGREED that what we are doing is correct</p>	<p>We hope continue WITH THESE SERVICES and are planning to advertise the services more comprehensively via our revamped website www.alexandrasurgery.com</p> <p>We shall gather or compile information leaflets on health concerns as they arise within our patient population. One example which has come to light only recently is the low Vitamin D level during winter months, when awareness was raised on the BBC.</p> <p>We aim to continue following the sensible restrictions on medication prescribing like Sleeping tablets including diazepam, antibiotics, Viagra.</p>

<p>PRG/PPG2011/12 key findings & comments Community oriented primary care</p>	<p>PRG/PPG2012/13 key findings & comments Community oriented primary care</p>	<p>PRG/PPG - PROPOSAL FOR THE FUTURE Community oriented primary care</p>
<p>We will regularly engage with our practice population in order to improve our services to meet the needs of the population we serve. In addition to written comments that can be put in our suggestion box the internet will also be used to allow our patients to voice their concerns and needs by registering online on a secure website.</p> <p>We hope to meet with the TURKISH COMMUNITY GROUPS next year to enable wider participation of this population with greater needs.</p> <p>We plan to engage with Rhodes Ave primary and Alexandra Park secondary schools near our Surgery to provide health education and support. This also allows parents, children, teachers and school nurses in our neighborhood to share their concerns and to work in partnership with Alexandra Surgery to provide solutions together.</p> <p>Our experience so far has been largely positive and there have been suggestions from the patients to set up a permanent patient participation group which they would like to call 'Friends of Alexandra Surgery'. We would like to explore this idea and help this group to make this concept a reality.</p>	<p>Our survey suggest that non English speaking patients want interactive media to engage with health and social care professionals We have suggested that a common website jointly owned by the communities and ALEXANDRA SURGERY would be a medium to enable them to participate in health promotion and self care</p> <p>Tamil community – a website called Tamilhealth.net has been launched with with the following aims</p> <ul style="list-style-type: none"> • Promote health literacy to educate Tamils • Inform Tamils of the services we provide at ALEXANDRA SURGERY. • To communicate effectively with Tamils to urge • Them to use NHS services appropriately and responsibly 	<p>We are working to restructure our website www.alexandrasurgery.com to be more user friendly and carry more facilities to inform, educate and enable our patients to engage with us and to benefit from what we are providing.</p> <p>Two of our team members have been assigned responsibility for regularly updating the website with current information, for example</p> <ul style="list-style-type: none"> • opening hours during holiday seasons • seasonal healthcare advice such as influenza, hangover <p>In response to suggestions we are looking into starting communication channels via social media (Facebook etc)</p> <p>We plan to engage with the local schools Rhodes Avenue primary and Alexandra Park secondary schools to provide health education and support. Also to allow parents, children, teachers and school nurses in our neighborhood to share their concerns and to work in partnership with Alexandra surgery to provide solutions together.</p> <p>Tamil community – Tamilhealth.net is being received well we will continue with the following aims Promote health literacy to educate Tamils To educate them to use NHS services appropriately and responsibly</p> <p>START A SIMILAR WEBSITE FOR Turkish speaking patients</p>