

Action Plan following Patient Representative Group Meeting Tuesday 28th February 2013

Issue Identified	Proposal	Action Agreed	By Whom /When	Review date
<p>Appointments systems</p>	<p>Increase number of pre booked appointments</p>	<p>We will continue to review and monitor this area and we have recently increased the number of pre booked appointments</p>	<p>Partners</p>	<p>September 2013</p>
	<p>Include book on the day alongside walk in for patients who cannot sit and wait and who are too ill to attend to book and return</p>	<p>We have recently started to do this and will continue to publicise this as much as we can - added to telephone answering message done etc</p>	<p>Practice Manager</p>	<p>September 2013</p>
	<p>Some patients waiting longer than others in Walk In</p>	<p>This has been raised recently and we have already changed so that we have one list and 2 doctors working from the same list to ensure patients are taken in order of arrival.</p>	<p>Practice Manager</p>	<p>July 2013</p>
	<p>Continue re education programme to ensure patients are booked appropriately with the correct member of the team</p>	<p>Staff are continuing the re education process to advise patients about our services and the correct "patient journey" for each attendance to ensure they are seeing the correct member of the team at an appropriate time. This could also include using other relevant and appropriate services for example Pharmacists, New 111, Minor injuries units etc</p>	<p>Practice Team</p>	<p>July 2013</p>

<p>Appointments systems continued</p>	<p>Continue to allow patients to attend either site to suit where appropriate</p>	<p>We are happy for patients to move between the sites if more suitable as we have a clinical system which can be accessed at both sites for all registered patients</p>	<p>Practice Team</p>	<p>July 2013</p>
<p>To hold walk in sessions on an afternoon as well as the morning</p>	<p>Discussed not feasible at the present time - this has been considered but not practical for many reasons - we do have urgent afternoon appointments to manage urgent requests each day already</p>	<p>Review in the future should this be manageable for change</p>	<p>Not applicable</p>	
<p>Routine blood appointments wanted within one week</p>	<p>We aim to offer urgent bloods within 2 days plus routine appointments within 2-4 weeks which the partners feel is very good - most of the routine bloods are required for ongoing monitoring and as such can be pre planned well in advance to allow for most patients to ensure we have capacity for more urgent patients.</p> <p>Patients can go directly to the hospital if they have access issues too</p> <p>We cannot do late night blood appointments as the samples are collected by the hospital between 4.30 - 5.00 pm each day</p>	<p>Practice team to manage and monitor any complaints and manage</p>	<p>July 2013</p>	

<p>High number of Did not attend (DNA's)</p>	<p>To raise awareness and reduce the wasted appointments to reduce from an average of 5% - 12 hours per month across the team</p>	<p>Continue with the work we are already doing Poster and information campaign supported by the Patient Group</p> <p>Practice to check if we can add information about DNA numbers to Life Channel TV in the waiting area alongside information on call system, newsletters etc etc</p> <p>Implement SMS text alerts to remind patients of pre booked appointments</p> <p>Include a section on the letters sent out to constant DNA patients to say we have the support of the patient group</p> <p>Continue to monitor and highlight information to patients and consider using financial</p>	<p>Practice Manager to review monthly and discuss at future patient group meetings</p>	<p>July 2013</p>
<p>Hospitals - follow up/performance</p>	<p>To provide more patient information on local Hospitals for patients to make decisions about where they go for treatment</p>	<p>There is lots of information available elsewhere about each provider and it would not be feasible for us to duplicate this and keep it current.</p> <p>The practice can offer individual advice when patients are being referred if appropriate from feedback they have received</p>	<p>Practice Manager</p>	<p>September 2013 to check if results have been published and pass on any information to patients</p>

		<p>The NHS is currently undertaking work on the "Friends & Family" Test for all patients who attend A & E or attend as in patient which will be fed back through the relevant channels</p> <p>Watch and wait for the results of the "Friends & Family" surveys and if we can advertise within the practice in the future</p>		
<p>Increase patient information</p>	<p>Patient group asked how the deal with any issues/complaints raised within the practice regarding the practice service or any other NHS provider as patients do not get feedback -: eg Pharmacy/ Hospital errors etc</p>	<p>As a practice we work with NHS Leeds and are involved in an event reporting programme to report and significant events within the practice and the NHS in general.</p> <p>We as an organisation want to learn from any events that affect the patients within the practice and have an open, supportive and honest approach to managing these within the team. We have a culture that allows staff to feel they can report issues to improve our services</p> <p>We always investigate and set out action/ learning plans if appropriate and also ensure staff are advised of any nice comments or good work done too as we feel both are important.</p>	<p>Practice Manager and team to continue to report events and use to improve services if required</p>	<p>September 2013 - date of practice annual review of events reported - we can then feedback on any high numbers of the same type of incidents as appropriate</p>

		We are also working with the Clinical Commissioning Group from April 2013 to feedback any service provider issues so they can address city wide if appropriate numbers are being reported of the name problems		
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