Action Plan From Practice Survey

No.	Action Item	Responsibility	Estimated Completion Date
1)	APPOINTMENT SYSTEM		
	Communication on how the appointment system works and how to obtain emergency appointments needs improving. • need to advertise the system better so patients have an easier understanding – practice booklet, notice boards, leaflets, telephone message. • to look into the possibility of translating it into different languages.	Practice Managers/Lead GP/Tamil speaking GP's/receptionists/members of PPG	June 2012
	Receptionists asking the patient what the problem is before giving an appointment. • This is not always appropriate (unless in cases of emergency) suggested script/flow chart to be devised so all calls are being handled the same way.	Practice Managers/Lead GP/Receptionists	April/May 2012
2)	TELEPHONE SYSTEM		
	0845 number and concerns over the costs of calls from a mobile To look into the technical issues with Leicestershire HIS telecoms as the contract lies with them, look at other options available	Practice Manager/Lead GP/HIS	Sept/Oct 2012
	Busy telephone system and suggestions of more lines to be put in The telephone system has been upgraded to allow for a queuing system with two additional lines increasing from two to four. Unfortunately, due to the current financial climate and resources we have, we are unable to employ extra staff to be able to answer any more additional lines. In the interim, existing practice staff that are	Practice Managers	Implemented March 2012

	available will be on standby to answer the phones at peak times.		
3)	ACCESS TO A DOCTOR Continuity of care – patients seeing different doctors instead of trying to see same doctor – difficulties arise with having two sites and high demand for appointments with the more popular doctor's. • Doctors/staff to encourage patients to see the same doctor • Doctors to re-book own appointments when the patient needs a follow-up. • Suggestions for more stability on GP rotas, ie: keeping GPs at same site on regular sessions and full day sessions rather than two half days at different sites	GP's/receptionists	March/April 2012
	Consultations – too much focus on computer, rushed, no eye contact and lack of communication. • Doctors all have their own pattern/style of working and need to review their consultation methods in a peer to peer review session of approx 1-2 hours	GP's	31 st May 2012
	 For any future vacancies that arise, the practice may need to consider recruiting doctors who have varied language skills. We have already addressed recruiting more female doctors into the practice with the successful recruitment of two new salaried female doctors in July and October 2011. 	Lead GP's	Future Vacancies
4)	RECEPTION Self Checking-in Screen Information on how to use to self checking-in screen should be available as some patients are experiencing problems using it. It will not check you in if you arrive more than 20 minutes early or 5	Practice Managers	April/May 2012

minutes late. Patients will be advised to report to reception.		
The current screens are due to be replaced with larger screens.	CCG	May 2012
 Privacy and Confidentiality – very difficult with an open reception. Manor Medical Centre has use of a patient interview room, which is located just off the waiting room for patients/staff to use if need to discuss anything private. Parker Drive Medical Centre has a quiet area at the side of reception for patients/staff to use if need to discuss anything private. Staff awareness of what is discussed and disclosed on reception, not to repeat patient's details back when making appointments etc. 	Receptionists/monitored by Practice Managers	March 2012
More seating space at Manor Medical Centre. • The waiting area at Manor Medical Centre has recently been extended with adequate new seating.	Practice Manager	March 2012
 Parker Drive needs to address the seating in the waiting area as it is ripped/slashed and needs recovering. Magazine and leaflets in waiting room at Manor Medical Centre There are mixed views around this due to the infection control guidance, it is advisable to refrain from having magazines in the waiting areas. 	Practice Manager	March 2012
 There is a possibility in the near future of TV screens being installed in the waiting rooms for viewing health promotion material and to be used as a tool for information sharing. 	CCG	Dec 2012
PRESCRIPTIONS Ordering prescriptions On-line	Practice Managers/Lead GP/HIS	June 2012
Practice to look into to see if currently available with our computer		

	system and to look at the feasibility of introducing this facility in the near future		

Areas Identified for Further Discussion with PCT / CCG

Appointment system

Requests for more flexibility to accommodate the employed i.e Saturdays at Parker Drive, Sundays and late evenings at both surgeries.

 To discuss with the doctors and Primary CareTrust/Clinical Commissioning Group options available to the practice to accommodate any of these requests.

Widening of doorways

Issue raised by wheelchair users at Manor Medical Centre where by they had difficulty opening the door into the corridor and general access to the consulting rooms.

- To be discussed with the Primary CareTrust/Clinical Commissioning Group ref DDA compliance and improvement grant funding.
- To liaise with practice architect to see if any suitable solutions

Parking problems – Parker Drive Medical Centre

There is absolutely no scope for improvement on this, due to the location of the surgery on a busy road and no spare land to extend, previous applications to the PCT have been turned down.

To open up dialogue again with the Primary CareTrust/Clinical

Commissioning Group ref relocation and improvement grant funding.	

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