



# **FIELD HOUSE MEDICAL GROUP**

## **ANNUAL REPORT**

**APRIL 2016 – MARCH 2017**

# Welcome to the Field House Medical Group Annual Report April 2016 – March 2017

## Staff Changes

There have been a few changes during the last year; Dr Hopper retired after over forty years at the practice. Attempts to recruit replacements have been unsuccessful due to very limited supply of GPs nationally but we are still trying to identify possible new candidates.

During this period we have been involved on a shared basis with groups of practices bringing in different professionals to support the team. Bharat is a qualified pharmacist who is part of a national pilot to see if they can reduce the workload on GPs. The other is a newly qualified nurse who is developing skills to be a practice nurse over a two year project.

We also recruited Sheena who was a community matron to work with the team, she has used and enhanced her skills to provide clinics and home visits for patients who need more support, Sheena retired and returned on reduced hours in February

We have also lost two nurses who have moved out of area Ella and Helen H, but have recruited Vicki who is a qualified enhanced care paramedic who will help with triage and acute home visits as well as minor ailments/injuries

## Training

We continue on our training programme, Dr Macrorie has been our registrar since August 2016 and we have had a rotation of a number of junior doctors. Due to limited capacity we no longer have medical students but we still have nursing students placed with us as well as supporting apprentices across the three practices in Freshney Green

## Patient Involvement and Feedback

We held a recruitment day at Freshney Green for all three practices and managed to recruit a small number of patients to be interested in giving their direct feedback. We discussed with them the results of the survey undertaken by North East Lincolnshire Clinical Commissioning Group and agreed some actions to take. Membership will be important over the coming twelve months as we see changes to the way some services are provided

## Services

We had to restrict our family planning service due to the loss of two experienced nurses; however we still continue to offer the same services as last year and are developing our nurses to deal with more minor and sexual health problems to free GPs to focus on the more complex problems. Our in house pharmacist Bharat and our senior nurse Helen M are also undertaking an intense course to be able to prescribe independently this should eventually reduce the workload of the GPs.

We also entered discussions with Dr Raghwani at Greenlands Surgery New Waltham about more joint working, so that we can better share workload, skills and do work more efficiently.

We hope to develop this relationship over the coming year so that both practices benefit

## Vaccination Campaigns

The flu campaign continued and was successful but with a lower uptake compared to previous years. The extended childhood vaccination programme was delivered as was the extended childhood flu campaign.

Vaccine Cold Chain Recall - The results of the recall, where there were doubts over the maintenance of our vaccine cold chain, following the CQC inspection: 477 patients were written to and none were identified from the recall as having tested positive for any of the viruses that vaccination was provided against. 115 patients attended for a booster immunisation as a precaution.

## Appointments System

We have made no changes over the last year and continue to monitor our appointments system. This seems to be working reasonably well apart from where availability of staff is limited. We will continue to review our systems to see if we can make any further improvements and offer more appointments in high demand times with the use of local based locums. We have had further discussion about increasing the number of telephone review appointments to free up face to face. This would be for patients who have had tests and need to be followed up with advice. WE will start this late April/ early May 2017

We had to discontinue the offer of appointments outside normal hours with a doctor or nurse with early morning on a Monday from 7.00am and late evening on a Tuesday until 8.00pm. This was due to the reduction in medical staffing which means we cannot safely cover all the hours available.

We have looked at our data for the last few years to compare no of GP appointments for the period April - March as follows

2012/13	41657 GP appointments of which 40076 were general and urgent appointments
2013/14	40598 GP appointments of which 40598 were general and urgent appointments
2014/15	38712 GP appointments of which 37690 were general and urgent appointments
2015/16	32436 GP appointments of which 31728 were general and urgent appointments
2016/17	36877 GP appointments of which 34756 were general and urgent appointments

The last year reflects our efforts to increase capacity and use good quality locums where available to support our attempts to improve access. We are looking at options to increase telephone reviews where appropriate to improve access. The DNA rate over this period was consistently between six and seven per-cent

## Complaints

We have received 26 formal complaints over the last year. The practice will always look at these as a valuable source of learning and where mistakes have been made we will apologise and make changes to the way individuals and the team work. Most complaints centred on communications, attitude, process, delays and treatment.

## External Changes

The NHS has been at the centre of political focus over the last year with finance and resources under great strain and lengthening waits for operations, A&E attendances and other particular specialties. Particular focus was over the waits in A&E departments nationally just after the New Year. The change to funding is having an impact on the practice as the CCG are continuing to work on alternative services to re-use this funding. We are still not sure on the impact so this makes decisions on our own service development difficult to make whilst these changes are introduced and their impact known.

## Information Technology

There is a continued push to develop remote consultations; the NHS is developing secure technology for this to happen. We know this does not reduce consultation time and as a practice we still prefer to use the telephone a great deal, as it helps with advice and communication where possible. However we are still open to developments should they be appropriate, useful and free capacity.

## Summary

**Despite the increasing workload, recruitment problems and rising needs of our patients we continue to focus on delivering quality care in an accessible way as possible, using the limited resources available in the most efficient way possible. However there may well be changes over the next year with services being shared over a larger population to increase efficiency and recruitment may become more difficult**