

Elm House Surgery & Cator Medical Centre

Business Development Plan 2019 – 2024

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Executive Summary

Purpose and Formation of the Business Plan

The formation of our business plan has been a positive and exciting development for the practices. We feel that with the changing nature of General Practice, the emersion of NHS England's Long term Plan and "Five Year Forward" view, together with our navigation into the Primary Care Network landscape, we are in a prime position to crystallise our aims and objectives for the forthcoming years.

Elm House Surgery and Cator Medical Centre have gone through a series of internal changes over recent years, and have now reached a period of stabilisation where we can self-reflect and closely examine how we can best serve our patients. As well as reviewing the strategic objectives of our commissioners and our own developmental aims, we have used feedback obtained from patient surveys, complaints, NHS Choices and the Patient Participation Group (PPG) to help identify areas for consolidation and improvement.

We hope that our practice team will find this plan valuable. We will happily share this plan with our PPG, patients and Bromley Clinical Commissioning Group (Bromley CCG). With numerous challenges facing General Practice, it is hoped this may assist others in understanding our future direction.

In formulating this plan we have learnt a lot about our ethos and shared vision. We genuinely believe we are stronger as an organisation because of this valuable work. We consider this plan to be a "living document" which we commit to reviewing and updating as the need arises.

Our Ethos and Values

Both Elm House Surgery and Cator Medical Centre strive to provide a high quality, personalised and accessible service to patients.

We are a forward thinking and progressive organisation, constantly working to improve standards, the patient journey and clinical outcomes.

Our core values which are shared amongst the Partners/ Directors and staff stipulate that we should:-

- Ensure that the delivery of patient centred care is our top priority
- Foster an environment of openness, support and care
- Treat our staff and patients with openness, dignity and respect
- Act professionally with integrity
- Provide a supportive and fulfilling environment where learning, education and development is at the heart of what we do

Practice Overview

Elm House Surgery and Cator Medical Centre are large PMS and APMS practices respectively, located within the Beckenham Beacon, in the Beckenham area of the London Borough of Bromley. Whilst the practices have independent contracts with NHS England to provide core and enhanced services to patients, both practices operate from shared premises and work collaboratively wherever possible.

Elm House Surgery has a list size of 18,481 patients, whilst Cator Medical Centre has a list size of 10,316 patients.

Our combined clinical workforce consists of five GP Partners/ Directors and nine Salaried GPs, some of whom work part-time. We also employ one Nurse Practitioner, one Practice Pharmacist, one Diabetes Specialist Nurse, seven Practice Nurses and three Health care Assistants.

Both Elm House Surgery and Cator Medical Centre are accredited training practices, with GP Registrars, medical students and student nurses.

Our non-clinical workforce consists of one Managing Partner, six departmental managers, five secretaries, thirteen administrators and sixteen receptionists who all work across both practices.

Access & Appointments

We offer routine appointments which are available to book six weeks in advance. We endeavour to keep waiting times to a minimum and continually review our access arrangements and appointment configuration to reflect seasonal demand.

At both practices we are very proud to offer urgent access to all patients who need to be seen the same day; no patient is turned away and we do our utmost to meet increasing demand.

Last year we improved our flu vaccination access by holding drop in clinics with the HCAs. This has resulted in increased uptake which we hope to further improve on this year.

- **Extended Hours & Extended Access**

Both practices offer extended hours and provide extra routine appointments in the evenings and Saturday mornings. Elm House Surgery offers late clinics until 7:30pm Tuesday – Thursday, and Saturday mornings from 8am – 10am. Cator Medical Centre offers core access until 7:30pm Monday – Thursday and on Saturday mornings from 8am – 12 midday.

Being a member of Bromley GP Alliance (BGPA) allows us to offer extended access to patients such as evenings and weekends. One of the BGPA access hubs is located at Cator Medical Centre which is extremely convenient for our patients. We aim to further develop our working relationship with BGPA in future to ensure that we are maximising the services available to our patients.

- **Active Signposting**

We are keen to develop the reception staff so they can deliver active signposting. Active signposting is one of NHS England's 10 high impact actions to release time for care, as outlined in the 'General Practice Forward View.' The reception staff will ascertain what the patient's need is, and using a directory of services and internal appointment booking flowcharts will be able to signpost the patient to the most appropriate source of support. This should free up appointments for patients who need to see a GP.

We want as many patients as possible to be empowered, equipped and confident to manage their own care. We are committed to patient education and involvement.

- **Improving Accessibility**

Cator Medical Centre was one of the first practices in the locality who piloted 'E-Consult', allowing patients to consult with a GP online. The benefits to patients are that they can often have problems resolved at a time that suits them, in some cases without the need to come to the Surgery. Due to its success we have since rolled this to Elm House Surgery.

A number of staff have been on courses for telephone triaging. This is something we hope to implement in order to reduce our urgent on the day demand. We are also considering extending the number of telephone consultations we offer, and have an 'Away Day' planned where we can collectively re-evaluate current access arrangements and explore other means of managing urgent demand and capacity.

Access will also improve as a direct result of our recruitment policy in which we will look to utilise skills of Allied Health Professionals.

- **Reducing Wasted Appointments**

We will actively seek to reduce the number of wasted appointments that we provide, allowing more appointments to be available for patients who most need our help.

We have recently reviewed our 'Did Not Attend' policy and will enforce this more rigorously going forward. Our PPG has assisted us in devising 'high impact' patient policies and we shall be publicising our approach to missed appointments on our websites and in the waiting rooms. Stricter adherence to this policy should result in less wasted appointments and a lower did not attend rate which we shall continue to audit on a regular basis.

The practices use a text message reminder service for appointments, and we also provide patients with the opportunity to cancel their appointments via text. This facility is available via the CCG-commissioned iPlato platform. We will continue to collect and update as many mobile telephone numbers as possible so more patients are provided with reminders.

Workforce

We pride ourselves on having a dedicated team of staff who are committed to providing a first class service to our patient population. Our staff turnover is relatively low, and we are fortunate enough to have a number of staff members who have worked with us in excess of 10 years. We will continue to recruit, train and develop the highest calibre of personnel to ensure we have a highly motivated and appropriately skilled workforce.

Patient feedback (endorsed by the views of our PPG) indicates that are patients feel looked after and well cared for. Indeed our staff are congratulated and thanked by ways of ad hoc compliments and largely positive nhs.uk reviews.

All our staff are regularly reviewed and have an annual appraisal. Regular 1:1 reviews act as a way of reinforcing effective performance, highlight areas for improvement and recognise individual strengths, as well as formulating personalised development plans. Our aim is to encourage our staff to flourish and enhance their ability to flourish within the workplace.

We are firmly focussed on providing a supportive environment to our team. We believe that training, coaching, team building and personal development is key to improving staff performance. We have an in-house progression model to future proof the sustainability of the practices. We regularly invest in training for all team members, including mandatory training, in-house training and external courses according to individual interest/practice need. We would like to hold more staff teambuilding events and 'Away Days'.

We have recently conducted a staff salary review to ensure that we are offering competitive rates of pay. We have also introduced extra holiday entitlement for long service, and specific sickness and maternity benefits for Salaried GPs in line with the British Medical Association's guidance.

We recognise that there are historical inconsistencies within the contracts of employment for our support staff. We aim to carry out a full contractual review and ensure the equalisation of terms and conditions for all staff going forward.

Clinical Workforce

- **Doctor Team**

We are looking to increase the number of Partners to strengthen our workforce. We believe that as physicians are given ownership for the business it will stabilise the workforce, improve retention of clinical staff and aid team building.

We have two Salaried GPs joining our teams in August this year, one of whom is about to complete her training with us as a GP Registrar. We are also looking to increase the number of Salaried GPs to accommodate our increasing list size. This will reduce our dependency on locum cover and ensure that the clinical burden is kept to an adequate level amongst existing personnel.

Dr Sivaja Sithamparapillai and Dr Haroon Yazdani are approved GP Trainers. We have a number of other doctors who have successfully completed the Introduction to teaching in Primary care (ITTPC) course and have a keen interest in education. We ordinarily have two GP Registrars on placement at any one time and also take medical students from UCL, Imperial and King's College London.

➤ **Nursing Team**

Elm House Surgery successfully employed a Nurse Practitioner in 2016, who under supervision from the GP team, routinely treats many minor illnesses, injuries and assesses our 'urgent on the day' patients.

We have reviewed the role of the Nurse Practitioner as part of our strategic workforce planning, and are now in the process of supporting and training an existing member of our nursing team to become an Advanced Nurse Practitioner. Long term this will enable more patients to be seen by an alternative clinician for minor illnesses which will reduce the pressure on the GPs, thereby freeing up their time to see patients with more complex needs. This move highlights our dedication to develop our existing staff to reflect the requirements that have been illustrated in the Five Year Forward view.

We are fortunate enough to have a highly experienced and extremely competent nursing team, all of whom have a range of different skills to best serve the needs of our patients. We are still looking to recruit an additional practice nurse (ideally with a diabetes qualification) to complement our existing team, and we are continually investing in upskilling existing nurses to capably and safely manage patients with chronic diseases and comorbidities. We will continue to support our practice Nurses with re-validation over the next few years. Our HCAs are also well skilled and have been trained to perform additional duties such as suture removal, flu and B12 immunisations, basic wound care, ear irrigation and cardiology diagnostic testing.

Our Lead Nurse is a mentor and supports student nurses for placements at the surgery.

➤ **Practice Pharmacist**

We have most recently employed a Practice Pharmacist, to support our GPs with prescribing, medicines optimisation and medication reviews, and to support our patients with minor ailments, annual health checks, medication adherence and self-management.

We greatly appreciate the importance of recruitment and retention, especially in the current climate, and intend to support the future operation of the NHS by continuing our commitment to train the next generation of doctors, nurses and allied health professionals.

Workforce Development & Skill Mix

Over recent years we have consolidated our teams by developing key personnel, for example:-

- Promoting three Salaried GPs to become GP Partners/ Directors
- Supporting a GP Retainer to become a Salaried GP and later a GP Trainer
- Supporting a GP on the GP Induction and Refresher course
- Upskilling an experienced A&E nurse to become our much valued Nurse Practitioner
- Training community/ hospital nurses to become practice nurses
- Upskilling a receptionist to become a HCA
- Upskilling an administrator to become a Patient Liaison Officer and later a co-ordinator for Integrated Case Management (ICM)

We have also established new clinical and non-clinical roles within the practice such as a Procurement Administrator, Quality and Outcomes Framework Administrator, Appointments Co-ordinator, Practice Pharmacist and Diabetes Specialist Nurse.

We intend to diversify and develop our workforce further by collaborating with our Primary Care Network (PCN) and creating new roles, examples of which are Social Prescribers, Care Navigators, Physician's Assistants, Paramedic Practitioner and Advanced Practice Physiotherapists.

We continually review our skill mix in line with current requirements and business objectives, both clinically and administratively.

We were one of the first practices to implement 'workflow optimisation' and now have dedicated 'Coders and Summarisers' who are trained to code clinical letters onto patient's medical records, rather than the GPs having to tend to every letter. This helps free up valuable GP time as only letters which require GP intervention are electronically workflowed to them. It has also resulted in cost savings, the ability to re-deploy the resources we have released, and improved job satisfaction for staff who have been given greater responsibility.

We believe we have a solid structure where staff members have designated job roles. We do, however, recognise that efficiency and the 'patient journey' is of paramount importance. To this end we are committed to ensuring that the administrative and reception teams are multi-skilled and have sufficient knowledge to help patients and colleagues when the need arises. Administratively, we aim to focus on enhancing the current skill mix so that each member of the team can perform every basic function. This should make us more resilient and able to deal with variable demands.

Management

As practices we have a diverse and stable managerial structure. Led by the GP Partners/ Clinical Directors and Managing Partner, the team consists of a Financial Controller, Practice Support Manager, Lead Nurse, Reception Manager, Administration Supervisors and Lead Secretary. Our aim is to maintain diversity of leadership which we hope will ensure we become a more successful, positive and inclusive organisation.

We try to maintain a friendly, relaxed ethos in order to encourage transparency and a positive approach. A calm and open culture has developed, although we encourage practice staff to remain focussed and project a favourable image to patients and visitors at all times. We aim to deliver exacting standards of patient care consistently and do our utmost to instil this in the team. From a managerial perspective, we think it is of paramount importance to lead by example as our aforementioned philosophy will become ubiquitous if it is projected at all times.

We have identified the need to re-examine our senior management arrangements. Strategic planning is crucial to the growth as a practice and our current systems leave the Managing Partner with little time to focus on this. As such we feel it would be beneficial for her to take an active lead in the PCN going forward; hence it's important that less of her time is spent on day to day operational management. It is an aspiration to recruit a Patient Services Manager to alleviate some of the pressure.

Communication

We hold weekly multidisciplinary practice meetings attended by GPs, nurses and Line Managers from both practices on Friday lunchtimes. As part of these we facilitate quarterly complaints/ significant events review meetings and bi-monthly palliative care meetings.

The doctors regularly update their CPD by way of bi-monthly educational sessions with local hospital Consultants, and in addition we run monthly 'Peer Teaching' sessions, a forum for our GPs to discuss hot topics, new guidelines or clinical troubleshooting for complex cases. The format of these is informal and has received excellent internal feedback as a medium through which peer learning can take place.

The GP Partners and Managing Partner meet weekly on an informal basis. In addition we hold a monthly business/ Partners meeting with a pre-prepared agenda, terms of reference and ground rules. There are standing items on the agenda such as CQC regulation and HR updates, however we will be developing this further to include quarterly accounts/ financial planning, QOF and KPI updates.

We hold regular departmental meetings which we feel are vital for staff morale.

The clinicians are invited to attend the Academic Half Day protected learning events as facilitated by Bromley CCG. We further make use of this protected time by having in-house training sessions for all staff. Most recently we have become approved IRIS (domestic abuse awareness) training practices.

We have recently started to use a practice intranet system to improve communication, upload and encourage staff to review clinical policies, and help with external appraisals. We intend to continually review the effectiveness of our methods of communication and staff engagement.

We would like to review our use of the task functionality within Emis Web as we recognise that our internal processes could be more streamlined and efficient. We aim to set up a working party whereby policies can be designed and introduced to aid reception staff in signposting patient enquiries. By refining these processes we aim to save valuable GP time and resource.

Patient Services

We offer all mandatory services under our current PMS and APMS contracts. In addition, we provide a broad range of services commissioned locally for the benefit of our patients:-

- Minor surgery and steroid injections
- Dermoscopy
- Chronic health disease management (specialist asthma, COPD, diabetes and hypertension clinics)
- Health screening
- CGL alcohol service
- Family planning (including coil and implant fitting)
- Sexual health services
- Phlebotomy
- Cardiology diagnostic testing (and a 'hub' for the Borough in conjunction with EHS)
- Cervical cancer screening
- Postnatal and baby clinics
- Travel services
- Learning disability annual health checks
- Immunisations
- Routine nursing services (ear irrigation, suture removal, dressings including compression)

The practice participates in the Quality & Outcomes Framework (QOF) for which our scores are consistently high.

The practice has dermatoscopes and two clinicians trained in their use. They are proving useful tools to help diagnosis and management, and has helped to significantly reduce dermatology outpatient referrals.

The practice has two clinicians trained to deliver joint injections, and we will look into training another. This will help reduce referrals to secondary care for such procedures.

We actively encourage patients to have point of care HIV testing. We also offer sexual health screening and chlamydia testing, as well as the C-card condom distribution scheme for patients who fulfil the eligibility criteria.

The practices provide an enhanced diabetes service. We currently have one doctor and three nurses who are trained to provide this role, including a highly experienced Diabetes Specialist Nurse. They are supported by

Health Care Assistants who have been trained to undertake diabetes foot assessments. We will be looking at employing or training an additional clinician to increase and provide better flexibility of diabetic care provision, and to improve the outcomes of diabetes care.

We will actively be scoping the potential to develop new services over the next five years. For example, we are considering introducing C-reactive protein testing to help reduce unnecessary antibiotic prescribing when assessing patients with lower respiratory tract infections.

We have been part of the Bromley Referral Optimisation Local Improvement Scheme in an effort to reduce referrals to secondary care. Methods such as utilising special interests of GP colleagues, requesting Advice and Guidance from speciality Consultants locally and regular use of Consultant Connect app have enabled us to significantly reduce our referral rates, thus lessening the burden on secondary care.

Patient Participation Group (PPG) & Patient Engagement

We have an established PPG who meet up quarterly, and we are extremely thankful for all the work they do. We look forward to continuing this close collaboration with our patients, and aim to continuously recruit new members to ensure that we have a representative mix of the patient population. The practice is keen for the PPG to become more proactive going forward, by obtaining regular patient feedback, facilitating engagement events and suggesting areas for improvement.

Developmental aims of the PPG going forward will include:-

- A more robust mechanism for reviewing membership
- Revised terms of reference and “ground rules”
- Improved administrative support from a practice perspective
- Help with publishing a quarterly newsletter
- The production of an annual patient survey
- Attendance and input at area PPG meetings
- The encouragement, collation and feedback for patient concerns

We conduct patient surveys and are very encouraged by the positive responses we receive. The survey is designed in conjunction with our PPG, and using the results we work on an action plan for the forthcoming year.

We have fully functioning Twitter accounts for those patients who use social media. This method of access has openly been advertised on our information screens within the practice and on our websites. We use our Twitter accounts to convey practice news, updates and share health education.

We have recently held a ‘Young People’s Drop-in’ for patients aged 16-24 which was well attended and well received. We aim to hold further patient engagement events in order to build our relationship with our patient body, educate patients through empowerment and knowledge of their health conditions, and reduce health inequalities.

Both Elm House Surgery and Cator Medical Centre are accredited Park Run Practices. The aim of this was to promote active lifestyles through ‘leading by example’. We will encourage participation by patients and staff alike, and see this as enjoyable way to engage with our patients on ‘neutral ground’.

We are working to become “Dementia Friendly” and have registered our practice with Dementia Friends. We have arranged information sessions for support staff and hope to be able to support those suffering with dementia and their carers better in future.

Integrated Working

- **Primary Care Network (PCN)**

Elm House Surgery and Cator Medical Centre have taken a lead role within our recently established Primary Care Network, comprising 6 practices from the Beckenham area. One of our GP Partners, Dr Thuwaraga Logeswaran, has been successful in attaining a shared Clinical Director role for our PCN in conjunction with a GP from a neighbouring practice. We are extremely excited to be developing shared strategies for the benefit of our collective patients. We will seek to provide services which are specifically targeted towards our patient demographic, ensuring that we best meet their needs at all times. We will aim to reduce health inequalities and are ready to engage with other sectors in order to ensure integrated healthcare provision.

➤ **Integrated Care Networks (ICN)**

We are signed up to the Integrated Care Networks (ICN), aimed at bringing primary, secondary and community care together, improving outcomes for patients with more complex needs or who are vulnerable.

➤ **Shared Care Record**

We are using the Local Care Record and Co-ordinate my Care and have found these tools to be extremely useful for information sharing.

➤ **Membership of Bromley GP Alliance (BGPA)**

We are member practices of Bromley GP Alliance (BGPA). We accommodate a hub for BGPA where we facilitate extended access for patients in the Borough. We have also recently started to accommodate a Community dermatology service also managed by BGPA.

➤ **Opportunities for Shared Services**

We currently provide a minor surgery, cardiology diagnostic and sexual health service for patients from other practices as well as our own.

Financial Sustainability

Whilst Elm House Surgery and Cator Medical Centre are private businesses, we are contracted by NHS England to deliver PMS and APMS services. This contract offers us a total contract sum in order to provide appropriate care and services to patients registered with us, and it is our decision on how much to invest in providing this service. The Partners/ Directors solely engage in NHS work (with the exception of non-NHS services for our own patients). We firmly believe in the principles of the NHS, and have a commitment towards re-investing profits in order to further develop our services.

The practices are currently financially sound, with no large outstanding debts or financial obligations. We recognise the need for robust cash flow and financial planning to ensure we survive and continue to grow in the current climate. We have a dedicated Financial Controller who is able to produce long term financial projections. Our practices work jointly in order to ensure sustainability and consolidate overheads.

Premises

Elm House Surgery and Cator Medical moved into its current premises in 2009. Our premises are purpose built and include 29 consulting rooms which are shared by clinicians across both practices. The building is owned and maintained by Community Health Partnerships (CHP).

We are fortunate enough to have a minor surgery suite, dedicated treatment rooms and larger than average clinical, rooms. There are four patient waiting areas and full wheelchair access throughout the building. Administrative offices are separated from patient areas by security-controlled doors, thus ensuring confidentiality and safety.

We have recently made several improvements to the practice, to the benefit of our patients:-

- We have divided a large phlebotomy room to create an additional clinical room to offer more appointments

- We have reconfigured the minor surgery suite to allow patients to access an additional room
- We have installed a clinical basin in one of our non-clinical rooms so it could be used as a clinical room instead

A key goal of the practice is to maximise the use of our facilities and available room space to become a “one stop shop” for our patients and their physical, emotional and health needs.

IT

As practices we consider ourselves innovative in the use of IT and we recognise the importance of digital enablement in improving accessibility. We are usually front runners when it comes to piloting new local initiatives, and have consistently been an early adopter of new technologies.

We already offer online access to patients and are pleased that our practices have one of the highest sign up rates in the Borough, exceeding local and national targets. Our patients can already book & cancel appointments online, view their detailed coded record and order repeat medication. We will continue to actively promote our online services and the use of the ‘Patient Access’ smartphone app. We will further develop our online services so that patients may book nurse and HCA appointments in the future.

Our most recent developments have been:-

- Being one of the first practices in the locality to initiate the use of E-Consult (online consultations)
- Migrating onto new interactive, more digitally focussed websites
- The introduction of iGPR (medical reports online) to reduce administrative burden and ensure safe, secure transmission of medical notes to third parties
- The use of an internal intranet system (GP Teamnet) as a shared area for policies, procedures and services
- Using Teledermatology to decrease referral rates
- Telephony – we have invested in new technology to allow dynamic cloud queuing and monitoring software
- The upgrade of the practice self-arrival and waiting room screens
- The participation in the referrals optimisation scheme, aimed at reducing the burden on secondary care
- The use of a new Emis linked software called accuRx which allows us to communicate with our patients via SMS, e.g. to inform them of investigation results or signpost them to patient information leaflets

We are firmly committed to further developing our use of IT over the next 5 years.

IT plans for the future include:-

- Exploring new technology such as apps or web portals to help patients manage their own health risks. These apps/ sites will include symptom checkers and signposting to alternative services.
- Introducing and augmenting the use of online consultations
- Exploring the use of video consultations
- Exploring digitisation of patient records
- Enhancing the use of our clinical system, Emis Web (there are a number of advanced functions within the software and we do not currently feel we are using these to our full potential).
- Promoting the use of the new NHS App

Summary

We believe in the benefits of working at scale and feel that we are in a prime position to be able to deliver the NHS Long Term Plan in line with the GP Forward View. We are keen to develop collaborative working relationships with other local practices; we believe that working together with likeminded practices offers great opportunities to improve patient care.

We are keen to introduce greater innovation in service delivery and remain responsive to the needs of our patients and commissioners. We understand the challenges facing primary care, the need to remain flexible, to adapt, and embrace new initiatives in order to create a sustainable future for the practices and our valued patients. We firmly believe we can take an influential leadership role in transforming health and social care services in the future.

Through our already established Primary Care Network (PCN) we intend to develop practical working relationships with our community, social care and voluntary organisations to provide a gateway to services for the local patient population.

We will continue to review this plan periodically and it will remain a standing item on our Partners business meeting agenda quarterly.