

# PARK VIEW GROUP PRACTICE

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## Park View Group Practice Business Development Plan (BDP) 2018 - 2020

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## Introduction

This is the Business Development Plan (BDP), for Park View Group Practice, for the period January 2018 – December 2020. The plan details our strategic goals for the forthcoming two-year period and is tailored to meet the requirements of the entitled population.

## Purpose

Our strategy will revolve around the requirement to deliver high-quality, safe, effective patient care. The plan demonstrates to our patients, staff (new and old) and to a wider audience our intentions for future initiatives, providing focus and direction on improving the services offered by Park View Group Practice.

Change is omnipresent, and if Park View Group Practice is to succeed, a plan to adapt to the ever-changing healthcare environment is pivotal to success.

## Overview

Established in the 1960s, Park View Group Practice moved to its current site in 1985. Currently, we have 8890 registered patients, cared for by a multidisciplinary team consisting of 31 staff; including 6 GP partners and 1 salaried GP (four males and three females).

### Our Mission Statement is:

“Park View Group Practice is committed to providing a high quality, evidence-based and cost-effective service to all of our registered patients in a caring, responsive, courteous and supportive manner.”

### Our Vision:

“To be the leading practice for patient experience and clinical outcomes using innovative technology consistent with modern general practice.”

### Our values are:

- Quality
- Innovation
- Integrity
- Compassion

We pride ourselves on delivering an outstanding service to all of our patients at all times, engaging with external agencies such as CCGs, hospitals, community teams, and ensuring our services meet the needs of our patient group.

## Premises

The practice moved into its current location in 1985, the building is owned by Dr. N Hussain, Dr. S Johari, Dr. K McEwan and Dr. D Rhodes, and is maintained by the Partners. Since January 2016 we have seen the list size increase by 8.02%, and therefore there was a requirement to expand the Practice to enable us to provide more clinical time to meet the increasing needs of the patient population. This was accomplished in between 2016 and 2017 which saw the conversion of a non-clinical room to a Phlebotomy room and an extension to include three consultation rooms. There is a now a requirement to update our existing facilities. We re-evaluated our current premises and felt these were the required areas of improvement during 2018 – 2020:

- Removal of the air conditioning units to become Health and Safety Compliant
- Improve the current sewage network to ensure staff and patients are provided with suitable amenities
- Provide electronic doors to ensure the Practice becomes more DDA compliant
- Update existing clinical rooms
- Replace the Practice roof
- Replace the sign at the front of the Practice
- Introduce a DDA compliant reception desk
- Update the Practices Fire Alarm System with a system that meets current legislation
- Ensure the Practice obtains a fixed hard-wire test and condition certificate

Once these areas of improvement are completed, we will re-evaluate our current service provisions and consider incorporating additional services, increasing our capacity to provide effective care.

## The team

Our staff, both clinical and administrative, ensure our patients are treated with dignity, respect, and empathy; we treat you as we would like to be treated ourselves. All staff is committed to delivering an outstanding service. Encouraging an ethos of continuous improvement, effective personnel management, and flexible working routines are key drivers behind our staff retention.

Our staff has the option to work full or part-time, reduce or increase hours, and gain experience in other settings, all of which have a positive effect on service delivery.

Staff do not suffer from stress, they have a manageable work-life balance, and they are able to suggest changes to improve the patient experience.

All staff undergoes an annual appraisal where the goals of the individual, team, and practice are discussed and agreed, with actions documented on how the said goals are to be achieved.

We actively encourage the team to continually enhance their personal development; this is demonstrated via the Data Co-ordinator completing a BTEC Level4 diploma in Business Administration and an NVQ Level 4 in Business Administration, one of our Medical Receptionist completing a Level 2 NVQ in Business Administration, the HCA completing a Level 4 Health and Social Care Assistant Practitioner Apprenticeship, the HCA completing a Level 3 NVQ in Health and Social Care, two of our Medical Receptionists have completed Phlebotomy courses, one of which will be undertaking further training to become a Health Care Assistant. Currently, the Senior Receptionist is undertaking a Level 2 NVQ in Leadership, the Practice Manager is about to commence on a NAPC Diploma in Advanced Primary Care Management, and one of our GPs is undertaking a course in Cognitive Behaviour Therapy, and another of our GPs is undertaking a course in Family Planning.

The Practice Manager is currently in discussion with NHS Stockport CCG Education Team to try and secure funding to support the Practice entering into the PACE Setter improvement programme. This is to ensure we are providing the best service possible to our patients that are children, young people, their families, and carers. If this is successful, the programme will be available for all Stockport Practices.

## Management

Our managerial structure is defined as 'flat hierarchal,' enabling the direct involvement of the team in the decision-making process, enhanced communications, rapid responses to business issues, but ultimately, a collaborative working environment, promoting continuous improvement and innovative thinking.

## Skill mix

At Park View Group Practice, we are continually reviewing the mix of skills across the multidisciplinary team. We have reviewed the job descriptions of all of our team and introduced cross-functional team working, with staff learning new skills, meaning that they can provide in-house cover for colleagues during both planned and unplanned absences.

A needs analysis and risk assessment will be conducted to ensure the Practice has sufficient clinical staffing levels. It will also recognise if the Practice has the right knowledge, experience, qualifications, and skills for the purpose of providing services in practice and demonstrating the capacity to respond to unexpected service changes.

## Training

Training is a regular occurrence at Park View Group Practice and is coordinated by Amy Waters, Practice Manager. Staff training complements personal development and underpins improved staff performance. Training for both clinical and administrative staff includes, but is not limited to, statutory, mandatory and recommended training.

## IT

We are committed to improving our IT systems. The practice manager is currently researching the systems of practices within this and other CCGs, evaluating the options and ascertaining costs.

The following are improvements that will enhance the system and ultimately, the service offered to the patients:

- Consider the implementation of the Microsoft Office SharePoint Server (MOSS)
- Introduction of an updated telephony system
- Improve patient communications through MJOG Smart
- Provide training for staff regarding Docmail and ensure it is fully implemented across the Practice
- Introduce dual monitor screens to all clinical staff and clinical coders
- Implement AccuRx

## Communication

**Internal:** We hold a number of internal meetings, all of which have a set agenda and minutes taken:

Wednesday – Reception meeting

Thursdays – Partners meeting

Last Thursday of the month – Clinical meeting

Once per month – Nursing Team meeting

Last Monday of the month – Administration meeting  
Once every two months – Health and Safety Monitor Team meeting

The purpose of such meetings is to review processes, evaluate issues which may have arisen, discuss continuous improvement initiatives and make plans for the quarter/year.

**External:** We also hold regular meetings with a number of external stakeholders such as the district nursing team, palliative care teams, health visitors, and midwifery teams.

Furthermore, we would like to extend the scope of our meetings to consider the inclusion of specialist teams within the community such as mental health, social care, and social workers.

Communication is key in any organisation; we are content that our communication is very good, but understand that it may need improving and continually ask for feedback to enable us to improve our services.

## **Patient service including service development**

We routinely review our patient service, particularly the challenges presented to us, analysing how we have overcome and improved as a result of such challenges. The Quality Outcomes Framework (QOF) is an incentive programme for GP practices, aimed at improving the quality of general practice. It is a voluntary process for all surgeries in England and was introduced as part of the GP contract in 2004. The indicators for the QOF change annually, with new measures being introduced and indicators being retired. QOF awards practices achievement points to:

- Managing some of the most common chronic diseases, e.g., asthma, diabetes
- Managing major public health concerns, e.g., smoking, obesity
- Implementing preventative measures, e.g., regular blood-pressure checks

For the year 2016/17, Park View Group Practice achieved 98.9%, a decrease of 0.1% from 2015/16. We are continually striving to improve and hope to achieve 100% for 2017/18 and future years.

We have implemented the Friends and Family Test (FFT), which regularly yields positive results, and these results will be displayed in the waiting room, Facebook page and on the practice website. The practice team reviews the results, and we take action to make improvements where necessary. Patients will be informed via a 'you

said, we did' section on our website, also displaying this information in our waiting room.

## **Patient Participation Group**

Our PPG membership has seen a decrease since 2016. This year we are focused on revitalising the group, considering running two groups – an online forum and a face-to-face group, varying meeting times and (if possible) venues to enable a broader range of attendees. The Practice Manager is supervising the IT Administrator who will undertake this project.

## **Profitability**

Under our existing contract GMS, we are allocated a total sum for the provision of services to our patient group. The decision regarding the allocation of such funds for services (and profit) rests with us, the practice. Within an ever-changing marketplace, such decisions are challenging, particularly with continual cost increases.

To ensure sustainability, we will continually review the allocation of the total sum to ensure we meet the needs of our patients and staff.

## **Clinical Commissioning Group**

Park View Group Practice is part of NHS Stockport CCG, with whom we have an excellent working relationship, and we remain fully committed to working with the CCG. We are currently liaising with the group about the following:

- 7-day working
- Working Well Service
- Psychological medicine
- Safeguarding processes
- PACE Setter Award
- GP Development Scheme
- Wellbeing Navigators

## **Summary**

Park View Group Practice is an innovative and forward-thinking practice with a fully committed team, offering an excellent level of patient care and we will continue to do so but will seek to enhance the services offered to our patient group.

Our BDP has identified areas in which we need to make improvements if access to services is to be improved. We will always consult with our patients, involving them at every stage of the process to ensure they are fully aware of the planned changes, the implementation process and how the changes will affect them as a patient, carer or interested party.

We will regularly update the BDP to reflect any changes we make or intend to make between 2018 -2020.



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### Table of development actions

Area	Actions required	Nominated lead	Interim Actions	Target date	Cost (if applicable)
<b>Premises</b>	Improve the health and safety of the premises	Practice Manager	Obtain quotes for:	October 2018	N/A
			<ul style="list-style-type: none"> <li>• Removal of air conditioning units</li> </ul>	September 2018 Completed	
	Improve DDA compliance of the premises		<ul style="list-style-type: none"> <li>• A new roof</li> <li>• Hardwire fixed test</li> </ul>	August 2018 Completed August 2018 completed	
Improve practice facilities and structure		<ul style="list-style-type: none"> <li>• New fire alarm system</li> <li>• Electronic doors</li> <li>• Signage</li> <li>• Install new DDA compliant desk</li> </ul>	<ul style="list-style-type: none"> <li>• PID submitted for reimbursement</li> <li>• PID currently submitted</li> </ul>	March 2018 completed	Approx £10000

<b>Staff</b>	<p>Continue to provide regular training opportunities to all staff members</p> <p>Ensure the Practice has sufficient staffing levels</p>	Practice Manager	<ul style="list-style-type: none"> <li>• Re-establish regular in-house clinical training programme</li> <li>• Appropriate staff to attend masterclasses</li> <li>• Arrange for the Practice to undertake the PACE Setter Programme</li> <li>• Conduct a Needs Analysis of staff</li> </ul>	<p>April 2018 Implemented</p> <p>March 2018 Implemented</p> <p>October 2018 Business plan approved by CCG in the process of procuring for all Stockport March 2018</p>	<p>N/A</p> <p>Overtime may be required</p> <p>N/A cost to be funded by the CCG</p> <p>N/A</p>
<b>Service Development</b>	<p>Strive to achieve maximum points available for QOF</p> <p>Strive to improve take-up of Enhanced Services</p>	Data Co-ordinator and Practice nurses (with support from GPs)	<ul style="list-style-type: none"> <li>• Improve recall system</li> </ul>	April 2018 Completed with good results	N/A
<b>IT</b>	<p>Introduce MOSS</p> <p>Update telephony</p>	Practice Manager and IT Administrator	<ul style="list-style-type: none"> <li>• Get a quote for MOSS</li> <li>• Awaiting</li> </ul>	<p>January 2018 Completed – introduced SLACK</p>	<p>TBC</p> <p>TBC</p>

	<p>system</p> <p>Introduce MJOG Smart</p> <p>Staff to start utilising Docmail</p> <p>Introduce AccuRx</p> <p>Provide dual monitors</p>		<p>contact from GMSCU with regards to the telephony system</p> <ul style="list-style-type: none"> <li>• Procure and introduce MJOG Smart</li> <li>• Secretaries to update letters to be compatible with Docmail</li> <li>• Procure and introduce AccuRx</li> <li>• An audit submitted to GMSCU regarding the number of dual monitors required</li> </ul>	<p>December 2019</p> <p>March 2018 completed</p> <p>March 2018</p> <p>March 2018 Completed</p> <p>June 2018 Completed</p>	<p>The annual payment of £144 but reduce overall payments to MJOG by £360/annum</p> <p>N/A however implemented to reduce stationary costs</p> <p>N/A</p> <p>N/A</p>
<b>PPG</b>	Revitalise PPG		<ul style="list-style-type: none"> <li>• Promote PPG, actively encouraging membership</li> </ul>	March 2019 Completed	N/A

			<ul style="list-style-type: none"><li>• Design online forum and implement, promoting awareness</li></ul>	March 2019 In process	TBC
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