**QUALITY OF CARE PROVIDED FOR THE SIX POPULATION GROUPS**

**OLDER PEOPLE**

We invite patients regularly for medication review and long term condition checks but we organise home visits for older patients who cannot attend the surgery to ensure that they are looked after. Any concerns raised during consultation or by friends and family are discussed during regular MDT meetings with allied healthcare professionals such as the District Nurses Team, the Long term Condition Team, Social Services team for the elderly. We run regular audits of patients who suffered a fall to ensure that they have been referred to the local Fall Team to try to stop reoccurrence. We also discussed patients at our MDT meetings. We are pro-active in the vaccination program of flu/shingles/pneumococcal to prevent illnesses.

We have introduced templates on the electronic medical records system where messages pop up when the clinicians open the notes to ensure that they invite patients for various review, vaccinations.

**PEOPLE WITH LONG TERM CONDITIONS**

We review patients with long term conditions regularly.

We have implemented a local service called “Avoidance Admission Plan”, a service that endeavour to prevent patients with long term conditions being admitted to hospital such as patients who suffer with Chronic Obstructive Lung Disease, mental health etc.... We have a register of around 2% of our practice population. They have same day access to the doctor via telephone if they have any concerns about their health; their care plan is reviewed and discussed with the patients and their carers regularly.

We have introduced templates on the medical records to alert clinicians to organise certain blood tests for patients on certain conditions. For example patients on Allopurinol have an alert popping up when they blood test are due.

**FAMILIES, CHILDREN AND YOUNG PEOPLE**

We run appointments throughout the day for easy access, for example we run nurses clinics after school for children to attend vaccination appointments. We have no specific designated baby immunisation clinics so not to restrict parents to bring the children in for their immunisations.

We check immunisation status on a weekly basis from the local child health list and chase parents who have not brought their children in, if we are unable to contact them, we contact the Health Visitors Team who can visit the parents.

We carry out vaccination campaigns as per national and local guidelines. We run regular reports to ensure to invite all children and young people for routine vaccinations such as flu for 2,3,4 yrs old, mmr for 14-25yrs old , Men c for 14-25 yrs old, Men ACWY for 18 yrs old.

We have a robust system to invite pregnant women for whooping cough vaccination throughout the year and the flu during the winter months. As soon as we find out a pregnancy, we send a letter of invite.

Also as soon as we are alerted of a birth we send a congratulation letter to the parent inviting the mother and baby for their six weeks checks. We confirm a date and time on the letter to ensureattendance. We log the name and date and as soon as the rota goes on the computer system, the appointment is entered from the diary.

We follow up if they don’t attend.

**WORKING AGE PEOPLE (INCLUDINGTHOSE RECENTLY RETIRED AND STUDENTS)**

We run doctors’ evening clinics on various days to meet the demand of patients who find it hard to attend the surgery during daytime. We offer all our patients our online service to book appointments electronically and request medication. We transmit our prescription electronically via the EPS system so the patient does not need to attend the surgery for their repeat requests.

We run early and late appointment with nurses for e.g. smear test, travel vaccinations, NHS health checks, new patient checks etc…

We have a pro-active recall system for cytology test.

**PEOPLE WHOSE CIRCUMSTANCES MAY MAKE THEM VULNERABLE**

Patients with learning disability are invited for regular health checks.

We respond in a timely manner to patients/carers/family’s concerns and arrange blood tests, reviews and referrals to the local memory clinic and also to the Community Dementia Support Team called DIST. We have invited several times the local Alzheimer Society to have a stand in the waiting room for patients to approach them should they wish to discuss concerns and/or seeking further advice and help.

We have introduced a letter template for clinicians to download all the necessary information when completing a section 47 request from Social Services so nothing is missed.

We discuss vulnerable patients during our MDT meeting with other health care professionals.

We refer carers and family to the access team for carers break and social assistance.

**PEOPLE EXPERIENCING POOR MENTAL HEALTH (INCLUDING PEOPLE WITH DEMENTIA)**

We ensure to keep the register up to date. We ensure that clinicians are familiar with the condition and familiar with the Mental Health Act and the Mental Capacity Act.

We endeavour to meet the needs of our patients with mental health problems. We offer in-house counsellors for patients who suffer depression and anxiety to receive counselling therapy in an environment they know. We can also refer to the local counselling service for more challenging conditions.

We review patients’ medication and bloods regularly.

We refer patients to the various local services such as MIND and the Advocacy service.

We will fit patients after morning clinics when they need an appointment urgently. When patients ring in the afternoon for urgent attention we will take their names and the duty doctor will ring them back to assess them.

Christine Lloyd

Practice manager