

Porter Brook Medical Centre

LOCAL PATIENT PARTICIPATION REPORT

2012/13

Background

The practice has a current list size of over 28,000 registered patients which has steadily increased over the last few years. Our list consists of a high percentage of students from Sheffield Hallam University (SHU) together with a local patient base. The patient population is extremely diverse with a wide variety of different needs.

Services are provided from two sites; Porter Brook Medical Centre is available to all patients whilst Student Health based at SHU is available only to students.

In early 2011 the practice decided to set up a Patient Participation Group (PPG) aiming to improve communication with our patient body. It was decided that two separate Groups would be formed; one to represent the needs of the patients attending Porter Brook, and the other to represent our student population who attend Student Health at the City Campus (Please see Student Health website for their full report).

PORTER BROOK PPG

Member Recruitment

Our PPG working party met in April 2011 to discuss the best methods of recruiting patients to join the Group. It was decided that we would recruit volunteers through open advertisement and invitation.

Open advertisement (June 2011 onwards) – In order to attract a representative mix of the practice population we advertised the PPG & its intended activities via posters displayed in the reception area, on the waiting room television, practice website and in the practice leaflet. The advertisements encouraged registered patients of differing ages, gender, ethnicity and backgrounds to come forward.

Invitation – Practice staff were asked to nominate registered individuals. A PPG invitation letter was then posted out to all nominees.

In July 2011 the working party met to select individuals to join the Group from those who had expressed an interest. We selected several registered patient members who we felt fitted our practice profile.

We ascertained that we were underrepresented in certain categories of patient. We therefore decided to send a postal invite to a random selection of patients who fell into these categories to see if we could evoke further interest and ensure our PPG was representative of our practice population. 25 patients aged between 20 and 30, 8 patients on our carers register and 15 expectant or new mothers were contacted. Reception staff also handed out further invitations at the desk.

The first PPG meeting was held on 8th September 2011 and since then the Group has met approximately every 6 weeks. The Terms of Reference agreed at the first meeting stipulated that membership would be limited to a maximum of ten patient members at any one time (for manageability purposes) and that additional members would be sought should numbers decline.

Practice Profile

		Practice Profile	
Gender	Males	15,414	54%
	Females	12,997	46%
Age Range	Under 18 years	1706	6%
	18 – 24	15,515	55%
	25 – 34	6,221	22%
	35 – 44	2,565	9%
	45 – 54	1062	4%
	55 – 64	659	2%
	65 – 74	312	1%
	75 – 84	207	0.7%
	85+	164	0.6%
Ethnicity		Ethnic origin is only recorded in approximately 80% of our practice population; of this 80%, approximately 65% of our patients are of British/ Mixed British origin. Remaining nationalities are mixed.	
Other		The practice looks after 5 residential/ care homes. We have a number of patients who receive treatment from the Primary Care Addiction Service. We have a small learning disability community. We have approximately 85 patients on our Carer's register.	

Profile of PPG Members

The table below shows a profile of all current PPG members. The mix in the Group has altered as some patients have had to withdraw their membership and new members have been recruited from underrepresented groups through continuous open advertisement and invitation.

Member	Gender	Age	Ethnic Origin	Other
1	Male	85	White British	Retired Regular service user
2	Male	44	White British	Regular service user
3	Female	65	White British	Retired Regular service user
4	Male	64	White British	Retired Regular service user
5	Female	42	White British	Employed FT Regular service user
6	Female	27	White British	Employed Former student
7	Male	76	Asian	Retired Community worker & council representative
8	Male	41	Mixed British	Employed
9	Female	17	Mixed British	Student

We believe our PPG is representative of our registered patients as far as is practically possible. We acknowledge that a significant proportion of our practice population are students (who predominantly use our branch site). We did not recruit additional student members as Student Health at SHU was establishing its own PPG.

Although we did not recruit any known drug users, Dr Barn (lead clinician for the PPG) has significant input with our substance misuse patients and learning disability patients, hence was able to act as their representative.

We considered it inappropriate to invite nursing/ care home patients to join the PPG; however Dr Goddard (PPG member) has significant involvement with our largest care home and was happy to act as their representative.

We continue to advertise for new PPG members from underrepresented groups on the practice website. Clinicians regularly hand out PPG invites to patients during clinic sessions.

Patient Survey 2011 - 2012

In November 2011 the practice conducted a patient satisfaction survey as devised by the PPG at that time (please see the Local Patient Participation Report 2011-12) for further details.

Results of this survey were collated and verified in late November 2011 and presented to the PPG in December. A proposed action plan based on the findings of the survey was drawn up and finalised by the PPG in January 2012. All members of the PPG were given the opportunity to comment on the results, put forward any proposals and discuss the contents of the action plan.

The practice has reviewed and implemented changes as a result of this action plan over the past year. Please see below for a full update on the actions which have been taken.

2011/12 PATIENT SURVEY – UPDATED ACTIONS

Priority Area	Comment	Proposed Actions	Actions Taken	Further Action Required
Attendance	Survey has been completed by a cross section of service users	None required	-	-
Appointment Booking Methods	Although the majority of respondents prefer to book over the phone/ in person, a reasonable proportion would prefer to use the internet.	Explore feasibility of online appointment booking – discuss with IT Manager.	The clinical system has been updated to allow patients to view past appointments and cancel appointments online. Patients are actively being encouraged to sign up for this new service in the practice. Online appointment booking will be implemented in due course.	Implement online appointment booking – IT Manager.
Getting Through On the Phone	78% of respondents felt it is fairly/very easy to get through on the phone which is a satisfactory response. Few patients try to speak to a Dr/ nurse.	None required Ensure question is repeated on future surveys.	Question has been repeated on the 2012/13 patient survey.	-
'Urgent' Access (Within 2 weekdays)	59% could get an appointment with a Dr, 72% with a nurse. Access is known to fluctuate through the year. Duty doctor system proving effective when offered. DNA's has a negative impact on access.	1). Provide refresher training with reception staff 2).Take findings to practice Access Group & Partners for further consideration. 3). Actively monitor missed appointments & aim to reduce DNA rate with the introduction of SMS appointment reminders. Ensure reception staff update patient consent as standard. 4). Repeat question on next survey	1).Reception staff & clinicians have been provided with refresher training. The Duty Doctor protocol has been revised and updated. 2). Discussed at Access meetings. Extra clinical resource has been put in place (new salaried GPs & an extra nurse appointed) to improve appointment availability. 3). SMS appointment reminders are being sent out to all those who have consented. Reception staff ask for consent as standard.	Continue to monitor access via Access Group meetings.

			<p>New patient registration forms have been adapted to include a box for consent. DNA policy is in place and missed appointments have reduced as a result of this and the introduction of SMS reminders.</p> <p>4). Question has been repeated on the 2012/13 survey.</p>	
Booking Ahead (More than 2 weekdays)	<p>72% could book ahead to see a Dr. Response rate for nurse booking was poor so hard to analyse. We acknowledge that particular GPs get booked up quickly.</p>	<p>1). Ensure doctor/ nurse appointments are uploaded onto the clinical system at least 4 week's in advance as standard. 2). Repeat question on next survey and continue to monitor</p>	<p>1). Due to changes within the clinical team & adaptations to the rota it has not always been possible to ensure that patients can book at least 4 weeks ahead for doctors/ nurses at any given time. 2). Question has been repeated on the 2012/13 survey.</p>	<p>Ensure appointments are uploaded onto the clinical system at least 4 weeks in advance.</p>
Confidentiality On Reception	<p>Patients can be overheard & 15% of respondents felt it should be addressed.</p>	<p>1). Place a queuing line/ notice at the reception desk requesting that patients allow each other privacy. 2). Empower reception staff to request that patients stand back if necessary. 3). Install posters in the waiting area advising that patients can request to speak to a receptionist privately.</p>	<p>1). A polite notice is now in place on the reception desk asking patients to allow each other privacy. 2). Reception staff will ask patients to stand back as required. 3). Posters have now been installed in the waiting area.</p>	<p>Investigate the possibility of incorporating an additional queuing line.</p>
Reception Staff	<p>Pleasing result.</p>	<p>Ongoing training, development and appraisal. In-house customer care training.</p>	<p>Reception staff continue to complete ongoing training, development and appraisal (including customer care).</p>	<p>-</p>
Waiting Time	<p>Waiting times generally acceptable. An ongoing issue with patients arriving late for their appointments which makes surgeries overrun.</p>	<p>Communicate (website, TV, waiting room & newsletter) the standard length of time for a doctor/ nurse appointment & the fact that patients can book a double if presenting with</p>	<p>Standard length of time for an appointment & the ability to book double appointments is now being advertised on the website, practice leaflet, newsletter and in the waiting room. Clinicians report that more patients</p>	<p>-</p>

		more than 1 problem.	are now booking extra time to allow for more than one problem.	
Awareness of Website, Extended Hours & Online Repeat Prescription Ordering	Need to publicise these services more effectively.	Investigate advertising these services on: Posters in the waiting area Bottom of prescriptions/ recall letters Back of appointment cards Practice newsletter A PPG leaflet	1). Website – In the process of being updated & ‘revamped’. 2). Extended hours now being publicised more effectively; posters have been placed in both entrances to the Practice, & they are being advertised on the bottom of recall letters & in the quarterly newsletter. 3). The online repeat prescription service has recently altered & this is now being advertised throughout the practice, in the newsletter & on the website. 4). All services are now being advertised on the back of appointment cards.	Website – Complete the update process & publicise as necessary. Consider producing a small PPG leaflet.
Surgery Opening Times	Majority of respondents happy with the opening times. Many of those who were not suggested opening at times which we already are; hence awareness is the key issue.	Ensure opening times are adequately displayed by entrance doors. Publicise extended hours as above.	Opening times including extended opening hours are now being displayed on each entrance door. Extended opening hours are being publicised more effectively (as above).	-
Health Promotion Events	Mixed response.	Discuss possible events with clinical team	Discussion took place with several GPs. It was agreed that we would include a further question about this on the 2012/13 survey. Specific events would be suggested.	See 2012/13 survey
Patient Demographic	Survey reached out to a representative mix of our practice population	None required	-	-

Waiting Room	Several comments indicating waiting room is too warm.	Liaise with contractor to verify that temperature control system is working effectively.	Temperature control system has been tested and appears to be functioning well. Reception will continue to monitor temperature and adjust radiators as necessary.	-
Parking	Can be an issue during busy periods. We have already investigated this & we do not have the option of extending the car park.	None required	-	-
0845 Telephone Number	Can cost more if contacting the practice from a mobile.	We have already installed signs in the waiting area informing patients that we can call them back.	The 0845 number has now been changed to an 0114 number to prevent callers being charged more from mobile phones. New telephone no. = 0114 263 6100.	-

Patient Satisfaction Survey 2012 – 2013

Due to success of the patient survey which was carried out in 2011/12 the PPG decided that a further survey would be undertaken this year and an action plan derived as a result of the findings.

Priority Issues

The PPG met in September 2012 and jointly decided on priority areas and questions for inclusion in the local practice survey (please see minutes linked to the website). It was agreed that no more than 15 questions would be asked and questions would remain relatively simple in order to evoke a greater response.

The Group agreed that several questions from the last patient survey would be repeated (such as appointment availability and ability to get through on the telephone), but that some of them would have to be re-worded to make them easier for the patients answering them to understand and to aid interpretation.

In last year's survey patients were asked whether they would be interested in attending a health education event at the practice. The PPG agreed to repeat this question and incorporate different options for patients to choose from. The PPG also felt that it would be beneficial to include two questions about experience during consultation with both doctors and nurses (as this was not covered last time). As patients arriving late for appointments had already been highlighted as an issue at former meetings, it was agreed that we would incorporate this into the survey somehow so that we could then devise and implement a 'Late Arrivals' policy based on the findings.

The Group agreed that there would be more free text fields this time so as to give patients the opportunity to comment further should they wish to.

Although questionnaires would be left anonymous we felt it essential to ask for some basic patient information (such as age, gender, ethnicity) to ensure the survey was representative of patients who use our services.

Questions for the patient survey were compiled in September 2012. A draft version was then e-mailed out to all PPG members so that any amendments could be considered prior to the next meeting. These amendments were discussed at the meeting in October 2012 (minutes on the website) and a final version of the patient survey was produced thereafter.

Practice Survey - Methodology

During the October PPG meeting discussion took place surrounding the best methodology of conducting the practice survey to ensure that sampling and results were credible.

The Group agreed that the best method of distribution (as determined by last year) was to hand out questionnaires from the reception desk. Reception staff would ask each patient to complete it and endeavour to assist patients as necessary. By distributing questionnaires internally we were sure to include some 'regular' service users who perhaps have a greater knowledge of the practice and our services. The questionnaire would also be available for completion online via the practice website in order to reach out to a wider diverse population. The group also agreed to e-mail the questionnaire out to patients in our 'Virtual Reference Group' as previous.

The Group agreed that the Practice should sample as large a population size as possible, but ensure that as a minimum requirement we would receive back at least 400 questionnaires as per last year.

Patient Survey – Implementation

The annual Porter Brook patient survey was carried out over a period of 3 months between November 2012 & January 2013.

The survey was handed out by the reception staff as patients attended for appointments, e-mailed out to those in our 'Virtual Reference Group', and available for completion online via the practice website. The Group had agreed that these methods of distribution would be most effective and would ensure that opinion was canvassed from a representative mix of our practice population.

Due to the diversity of different languages spoken by our patient population it had been decided that it was not feasible to translate the survey into alternative formats. The practice website is in the process of being updated & will hopefully incorporate a translation tool which will benefit future surveys.

A staff member was available in the waiting area to answer any questions and assist patients with reading/ completing the survey where necessary.

411 questionnaires were completed in total which the Group felt was as sufficient a sample size to ensure credibility. 3 out of the 411 were completed electronically.

Results from the patient survey were collated and analysed in house. The PPG agreed that the methodology chosen to undertake the survey and analyse the results was valid. We also agreed that our response rate was good enough to ensure credibility (and an improvement on the last national patient survey where 167 questionnaires were returned).

Patient Survey – Discussion & Action Plan

Results and analysis of the patient survey were disseminated to all PPG members and then discussed at the PPG meeting in February 2013 (minutes available on the website).

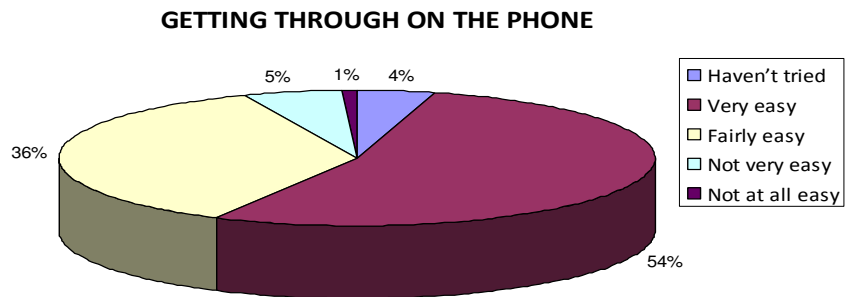
The group agreed on a conclusive action plan to take from the patient survey. All PPG members were given the opportunity to comment on the results, put forward any proposals and discuss the contents of the action plan.

PATIENT SURVEY 2012/ 2013 – STATISTICS (Figures indicate no. of respondents)

A. GETTING THROUGH ON THE TELEPHONE

Q1. In the past 6 months how easy have you found the following?

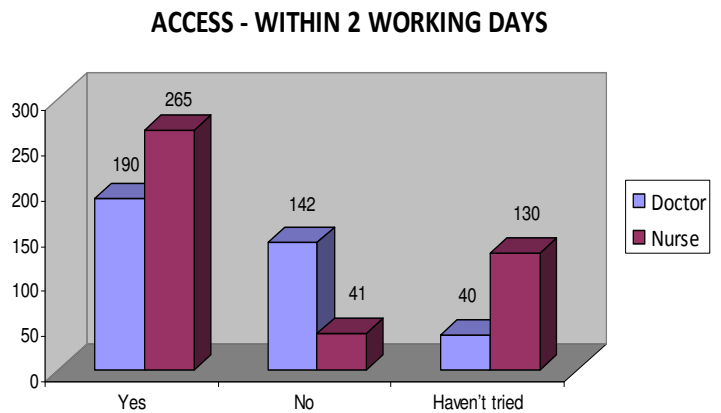
	Haven't tried	Very easy	Fairly easy	Not very easy	Not at all easy
Getting through on the phone	17	221	148	22	3



B. ACCESS

Q2. Think about the last time you tried to see a doctor or nurse within 2 working days. Were you able to do so?

	Yes	No	Haven't tried
Doctor	190	142	40
Nurse	265	41	130



Q3. If you felt that you needed to be seen before the next available appointment, did the receptionist offer you a telephone call with the Duty Doctor?

Yes	155
No	59

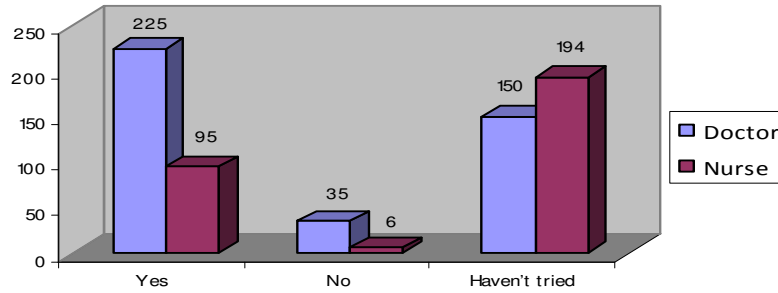
Positive Comments	20
Good Timing of Calls	10
Not offered all the time	7
Not always helpful	4
Got same day appointment	4
Offered an alternative	2
Difficult	1

Q4. Last time you tried to book ahead, were you able to get an appointment with your preferred doctor or nurse?

	Yes	No	Haven't tried
Doctor	225	35	150
Nurse	95	6	194

Limited to when able to make appointments	2
Long Wait	12
Generally Positive Comments	6
Would like to be assigned a regular doctor	1
Willing to wait	1

ACCESS - BOOKING AHEAD

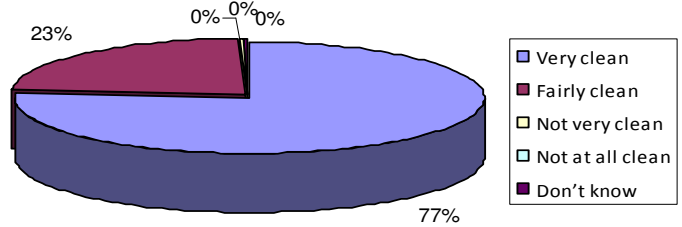


C. ARRIVING FOR YOUR APPOINTMENT

Q5. How clean is the Practice?

Very clean	314
Fairly clean	95
Not very clean	1
Not at all clean	0
Don't know	1

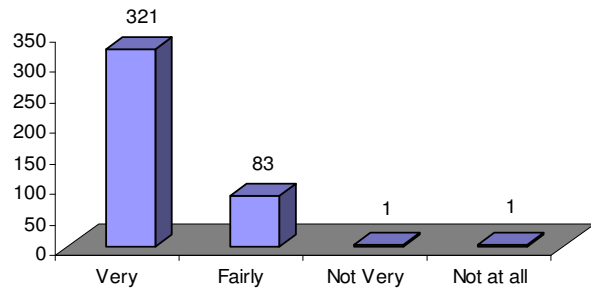
PRACTICE CLEANLINESS



Q6. How polite and helpful do you find the receptionists at the Practice?

Very	321
Fairly	83
Not Very	1
Not at all	1

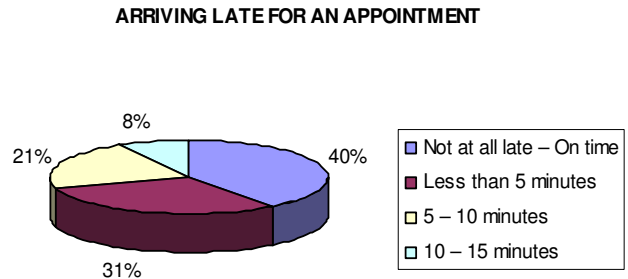
PRACTICE RECEPTIONISTS



Very nice and helpful (generally positive comments)	17
Not given enough information by reception (eg: waiting times)	1
Not helpful on the phone	1
Dependent on individual receptionists	4
Check-in Machine is beneficial	1
Able to overhear discussions	1

Q7. Bearing in mind most appointments are 10 minutes long, how late do you feel is acceptable to arrive for your appointment and still be seen by a doctor or nurse?

Not at all late – On time	159
Less than 5 minutes	123
5 – 10 minutes	86
10 – 15 minutes	33



Up to 30 minutes is acceptable	1
Always arrive early	7
Don't mind waiting	1
Dependent on external factors	14
Parking problems	2
Have to wait for appointment anyway	10
Persistent offenders should be addressed	2
If late, patient should work around other appointments	2
Okay to be late if phone ahead	5
Been refused myself before	1

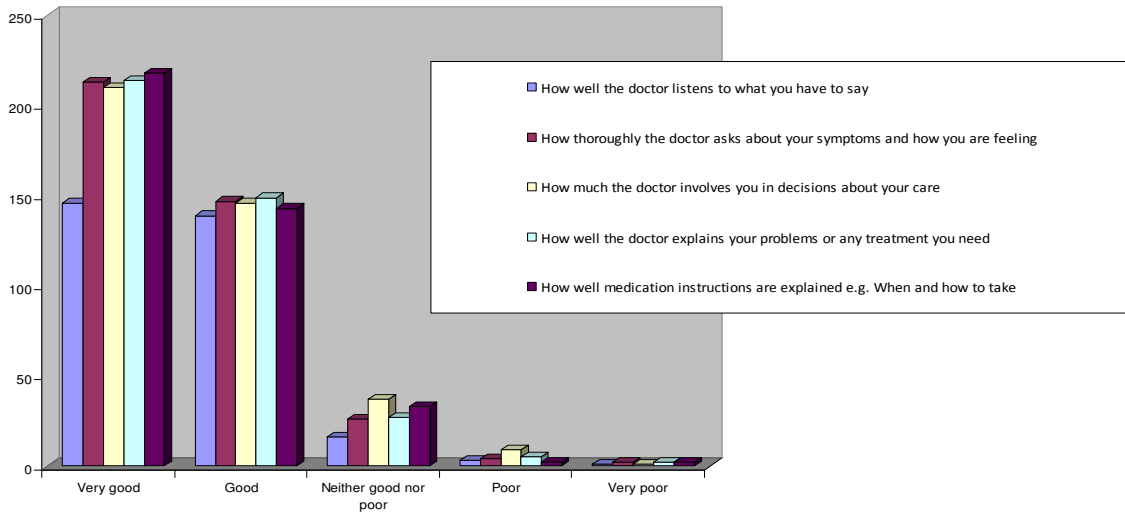
D. DURING CONSULTATION

Q8. Thinking of when you see the doctor, how do you rate the following?

	Very good	Good	Neither good nor poor	Poor	Very poor
How well the doctor listens to what you have to say	146	139	16	3	1
How thoroughly the doctor asks about your symptoms and how you are feeling	213	147	26	4	2
How much the doctor involves you in decisions about your care	210	146	37	9	1
How well the doctor explains your problems or any treatment you need	214	149	27	5	2

How well medication instructions are explained e.g. When and how to take	218	143	33	2	2
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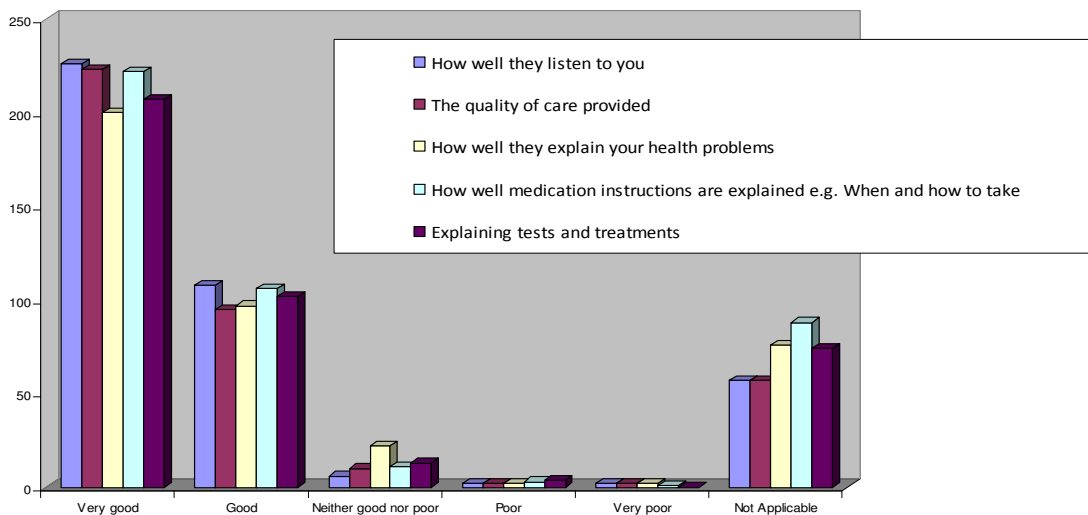
CONSULTING A DOCTOR



Q9. Last time you saw a nurse at the Practice, how good did you find the practice nurse at each of the following?

	Very good	Good	Neither good nor poor	Poor	Very poor
How well they listen to you	226	108	6	2	2
The quality of care provided	223	95	10	2	2
How well they explain your health problems	200	97	22	2	2
How well medication instructions are explained e.g. When and how to take	222	106	11	3	1
Explaining tests and treatments	207	102	13	4	0

CONSULTING A NURSE



Doctor Comments

Don't feel listened to	4
Not always helpful advice	5
Dependent on doctor	13
Good Service (Generally positive comments)	20
Would like a follow-up plan	1
Not certain doctor fully understands	2
Don't feel patient and doctor work together	1
Like to see a specific doctor	8
Long wait for referral	1
Appointments can feel rushed	1
Involve patient too much	1

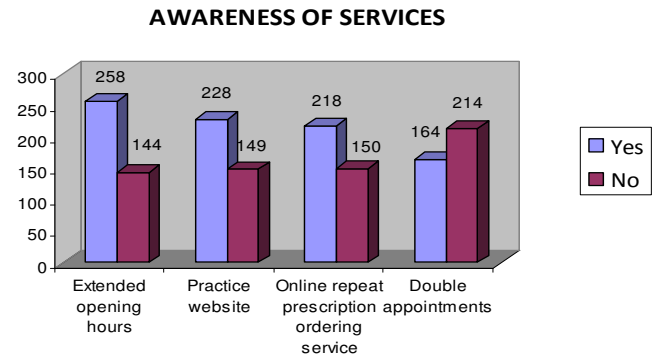
Nurse comments

Excellent (Generally positive comments)	10
Wrongly directed to a nurse instead of a doctor	1
Conflicting information between doctor and nurse	1
Not treated as feel should have been	2
Nurses have more time	3
Long wait	1
Dependent on nurse	1

E. PRACTICE SERVICES

Q10. Are you aware of the extended opening hours (early morning, evening and Saturday mornings), practice website, our online repeat prescription ordering service, and ability to book double appointments?

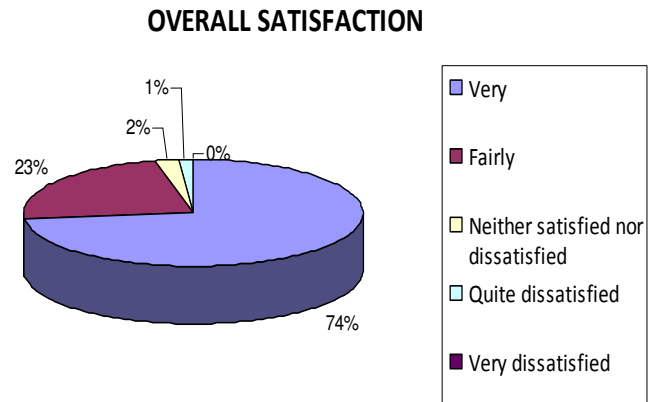
	Yes	No
Extended opening hours	258	144
Practice website	228	149
Online repeat prescription ordering service	218	150
Double appointments	164	214



F. OVERALL SATISFACTION

Q11. In general, how satisfied are you with the care you get at the Practice?

Very	306
Fairly	96
Neither satisfied nor dissatisfied	9
Quite dissatisfied	6
Very dissatisfied	0

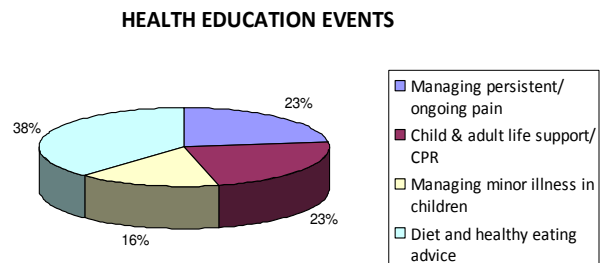


Generally positive comments	9
Doctors need to be aware of alternative help	2
Don't like repeat prescription service	1
Not assigned to one doctor	1
Consistent care	2
Would prefer same day appointments	2
CBT/mental health unhelpful and hard to organise	2
Misdiagnosed	1

G. HEALTH PROMOTION EVENTS

Q12. We are thinking of running some health promotion events at the Practice. Would you be interested in attending any of the following events? *(Please tick all that apply).*

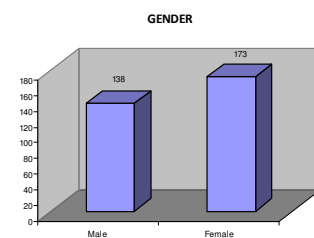
Managing persistent/ ongoing pain	64
Child & adult life support/ CPR	63
Managing minor illness in children	44
Diet and healthy eating advice	105



H. SOME QUESTIONS ABOUT YOU

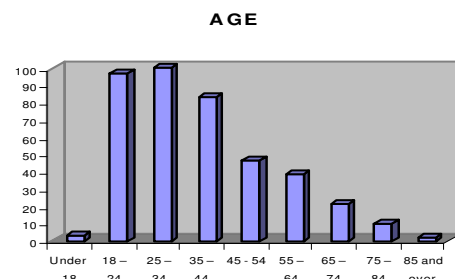
1). Are you male or female?

Male	138
Female	173



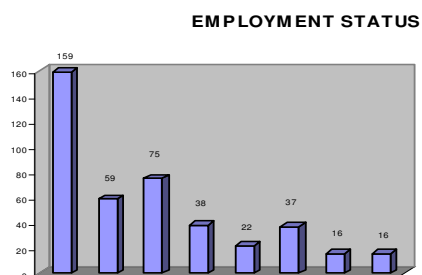
2). How old are you?

Under 18	3	55 – 64	39
18 – 24	97	65 – 74	21
25 – 34	100	75 – 84	10
35 – 44	83	85 and over	2
45 - 54	47		



3). Which of these best describes what you are doing at present?

Full-time paid work (30 hours + per week)	159
Part-time paid work (under 30 hours per week)	59
Full-time education (school, college, university)	75
Unemployed	38
Permanently sick or disabled	22
Fully retired from work	37
Looking after the home	16
Doing something else	16



4). What is your ethnic group?

A. White

British	310
Irish	4
Any other white background	19

B. Mixed

White & Black Caribbean	5
White & Black African	1
White & Asian	10
Any Other Mixed Background	7

C. Asian or Asian British

Indian	12
Pakistani	14
Bangladeshi	4
Any Other Asian Background	11

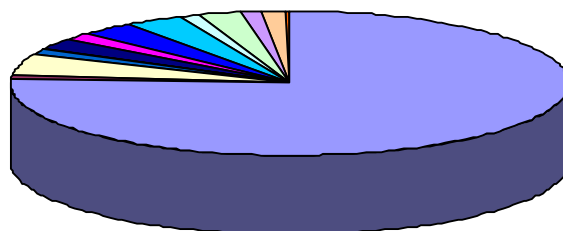
D. Black or Black British

Caribbean	4
African	6
Any Other Black Background	0

E. Chinese or other ethnic group

Chinese	0
Any Other Ethnic Group	1

ETHNICITY



OTHER COMMENTS

Positive Comments

Receptionists	5
Computer check-in	2
Alternative medicines	1
Midwives	1
Prompt	14
Consistent	1
Staff	25
Call Back	1
Doctors	12
Reception area	16
Telephone Number	1
Nurses	7
Moves along with NHS necessities	1
Treated as an individual	2
Help with transport	1
Support	4
Appointments	10
Pharmacy	2
Text Reminders	2

Negative Comments

Website	2
Cleanliness	3
Emergency Appointments	3
Appointments	8
Emotional Support	5
Receptionists	2
Reception Area	7
Doctors	9
Rushed	3
Repeat Prescription Service	5
Phones	8
Parking	8
Appointments running late	8

Patient Survey – Discussion & Action Plan

Results and analysis of the patient survey 2012/13 were distributed to all members of the PPG in January 2013.

Findings of the patient survey were discussed at the subsequent PPG meeting. A proposed action plan was drawn up and finalised at the meeting which took place in February 2013 (minutes on the practice website). All PPG members were given the opportunity to comment on the results, put forward any proposals and discuss the contents of the action plan.

SUMMARY OF FINDINGS & ACTION PLAN

Priority Area	Comment	Proposed Actions	Timescale for Completion
Getting Through On the Phone	90% of respondents felt it was very/ fairly easy to get through which is an excellent response and an improvement on last year.	None required Repeat question on future surveys	Next survey
Access - Within 2 Working Days	57% of those who had tried could get an appointment with a Dr; 87% with a nurse. Access is known to fluctuate throughout the year.	1). Report back findings to the practice Access Group. 2). Re-assess access later in the year when additions to the clinical team have been established. 3). Re-evaluate 'urgent' access arrangements via the Access Group.	Next Access Meeting 6 months Next Access Meeting
Duty Doctor Call Back	72% of respondents were offered a call back if they felt they needed to be seen before the next available appointment – deemed satisfactory. Patient awareness is increasing. Receptionists adhere to protocol. Comments positive.	1). Ongoing training and development as required. 2). Ensure new receptionists are aware of the Duty Doctor protocol.	Immediate and ongoing
Booking Ahead With Preferred Clinician	Out of those who had tried, 87% could book ahead to see a Dr and 94% to see a nurse (excellent response). We acknowledge that there may be a wait to see certain Drs due to part-time working, holidays and cross cover at Student Health.	1). Continually monitor access and the ability to book ahead via the Access Group. 2). Ensure doctor/ nurse appointments are uploaded onto the clinical system at least 4 weeks in advance as standard.	Immediate and ongoing
Practice Cleanliness	76% of respondents find the practice to be very clean & 23% fairly clean which is a positive response. New cleaning contractor recently appointed.	1). Maintain and closely monitor standards of cleanliness in line with CQC requirements. 2). Update infection control policy as required. Infection Control Lead to conduct audits and random spot checks.	Ongoing Ongoing
Reception Staff	Excellent response with some lovely comments. Issue of confidentiality on the desk mentioned once more.	1). Congratulate and feedback comments to the reception team. 2). Provide re-fresher customer care training as necessary. 3). Update the support team on procedural changes as required.	Immediate Ongoing Ongoing

		4). Investigate the possibility of a queuing line at the desk.	6 months
Arriving Late	Majority of respondents do not feel that is acceptable to arrive more than 5 minutes late for an appointment.	1). Formulate and implement a 'Late Arrivals' policy taking into account the views & comments of the respondents. 2). Educate patients about the impact of arriving late for appointments via the website and newsletter.	3 – 6 months Ongoing
Doctor Consultations	Excellent response (mostly very good/ good) with no key developmental areas highlighted. Several comments stating that the level of service depends on the individual GP.	1). Feedback results to the doctor team including individual comments. 2). Focus on obtaining more specific feedback for individual GPs on the next survey.	Immediate Next survey
Nurse Consultations	Excellent response with no key developmental areas highlighted.	1). Feedback results to the nurse team. 2). Look at a mechanism to incorporate some individual nurse feedback on the next survey – this could be used in annual appraisal and review.	Immediate Next survey
Practice Services	Awareness of the extended hours, website and online repeat prescription service has improved over the last year (positive response). Fewer patients know that they can request to book a double appointment.	1). Continue to publicise all services via the website, newsletter and in practice. 2). 'Re-vamp' the practice website and update on a regular basis or as is necessary. 3). Investigate the logistical & financial implications of having a custom screen in the waiting room in order to advertise services more effectively.	Ongoing 6 months & ongoing 6 months
Health Promotion Events	'Diet and healthy eating advice' proved the most popular theme.	Discuss this with the clinical group & hold an appropriate health promotion event at the practice.	6 months
Cold/ Wintry Weather	Comments made regarding the safety of the car park & surrounding areas during winter. It's acknowledged that is too large an area to grit ourselves.	Discuss this with the contractor who maintains the grounds to see if they can offer us an additional service during winter.	1 month
Parking	Can be an issue during busy periods. We have already investigated this & we do not have the option of extending the car park.	None required	

Practice Opening Hours

Monday, Tuesday, Wednesday and Friday

8:20am - 6pm

Thursday

8:20am - 4:20pm

Extended Opening Hours (for pre-booked appointments only)

Doctors: Alternate Tuesdays & Wednesdays - Early appointments from 7am
Late appointments from 6pm to 8pm

Saturday mornings – 8:30am to 11:40am

Nurses: Alternate Tuesdays & Wednesdays – Late appointments from 6pm to 8pm

Blood Tests: Alternate Tuesdays & Wednesdays – Early appointments from 7:50am

Doctors and nurses see patients by appointment throughout the day. You can make an appointment by telephoning the surgery (**0114 263 6100**) or calling in at reception.

N. Phillips March 2013