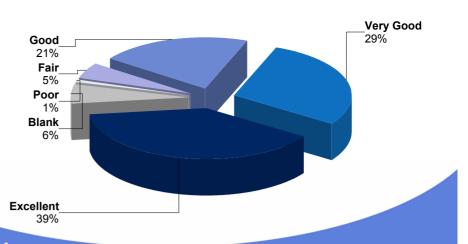
88%

of all patient ratings about this practice were **good**, **very good** or **excellent**



Thank you for your participation in this survey

Patient Experience Survey Results 2011/2012 Stanley Medical Group

"Striving towards excellence"



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Private and Confidential Ms Sue Elsbury Stanley Medical Group Stanley Primary Care Centre

Clifford Road Stanley County Durham DH9 0AB

Improving Practice Questionnaire Report

Stanley Medical Group

February 2012





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Ms Sue Elsbury Stanley Medical Group Stanley Primary Care Centre Clifford Road Stanley County Durham DH9 0AB

16 February 2012

Dear Ms Elsbury

This report outlines your patient feedback from the Improving Practice Questionnaire (IPQ). Your results have been illustrated in tables and graphs with associated benchmarks where applicable. Details of score calculation and statistical methods have been provided to help you in the interpretation and understanding of your results. You will also receive an A4 poster summarising your results and a certificate of completion which you may like to display to patients to indicate that you value their views in order to inform positive change within your practice.

If you are carrying out this survey in order to help meet the requirements of the patient participation directed enhanced service (DES) for GMS contract, a guidance template for discussion of these local survey findings and an action plan have been included which may help facilitate discussions with your patient reference group (PRG).

Please note that the scoring scale used to calculate the mean percentage scores was updated in October 2009 in line with feedback from practices and health professionals. This is explained in greater detail in the supporting documentation found at the end of this report. In this report any previous scores displayed will have been calculated using the new scale to be directly comparable with your current scores.

The format of this report has been updated, which we hope will provide you with a clearer picture of performance.

We hope these results give you useful feedback as to how patients rated the practice and its service, and provide you with a basis for reflection. In order for us to improve our services, we would be very grateful if you could complete and return the enclosed feedback form.

Please contact the office on 0845 5197493 or reports@cfep.co.uk if you require further information about your report.

Yours sincerely

Helen Powell Survey Manager

Report Contents

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Your patient feedback	
Distribution and frequency of ratings (table 1)	P1
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Sup	porting	documents	
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Details of score calculation

Explanation of quartiles

Page by page guide to the interpretation of your report

Sample questionnaire

Guidance template for discussion of local survey findings and action plan

Feedback form



Introduction

About the IPQ

The IPQ is a well-established questionnaire widely used in the UK.

Since 2004, over 3,000,000 patients have completed an IPQ providing valuable patient feedback to over 4,000 practices and over 16,000 health practitioners, many of these practices and health practitioners having completed the survey on more than one occasion.

Extensive published validation studies (please see http://www.cfepsurveys.co.uk/library/publications.aspx) have established that the IPQ is a reliable and sensitive tool: accurately measuring patient satisfaction in designated areas and is sensitive to change - if the IPQ is carried out on more than one occasion any change in patient perception of service can be clearly and reliably monitored.

This report outlines the feedback that has been collected and analysed from a sample of your patients. Full explanation on how to interpret this information can be found in the report. We hope that this feedback is useful and a basis for reflection.

A sample of the IPQ questionnaire is included at the end of this report for reference.

About the benchmarks

Benchmarks are a useful guide as to how your practice performed in relation to all the practices who have carried out an IPQ survey. Benchmark data provided relates to either all practices or according to practice list size (the practice list size benchmarks displayed in this report are representative of your practice), as we have established this plays a part in scores achieved. However, it should be noted that other factors such as geographical location and clinical setting may also affect scores and benchmarks may not always be truly representative. Furthermore as it is not mandatory for a practice to carry out an IPQ survey, benchmarks provided are effectively based on data collected from a *volunteer* sample. Volunteer samples often perform better than an 'average' sample which could make the benchmarks provided artificially high.

Your feedback

From the report you will be able to clearly pinpoint areas where you scored well and also those areas where you might feel that improvements may be needed. However, it is advisable to take time to assimilate all the feedback and to avoid scanning the report and noting specific scores on which too much emphasis can be placed. In fact, the clearest reflection of patient satisfaction can often be seen in the frequency and distribution of patient ratings and in their written comments.

A page by page guide to the interpretation of your report has been incorporated in the supporting documentation at the end of this report which you may find useful.

Other useful information

Together with your report you will receive:

- An A4 poster: to enable you to share the results of your local survey with the patients in your practice.
- A 'Guidance template for discussion of local findings and action plan': completion of which may help you meet the requirements of the patient participation directed enhanced services (DES) for GMS contract, if required.

Your patient feedback

Your patient feedback

Table 1: Distribution and frequency of ratings, questions 1-28

Question	Poor	Fair	Good	Very Good	Excellent	Blank/spoilt
Q1 Opening hours satisfaction	0	7	60	88	57	3
Q2 Telephone access	2	29	64	65	49	6
Q3 Appointment satisfaction	3	15	61	65	66	5
Q4 See practitioner within 48hrs	13	35	72	53	28	14
Q5 See practitioner of choice	14	44	62	53	31	11
Q6 Speak to practitioner on phone	3	24	68	51	35	34
Q7 Comfort of waiting room	1	18	72	68	49	7
Q8 Waiting time	4	27	75	63	35	11
Q9 Satisfaction with visit	0	3	29	72	105	6
Q10 Warmth of greeting	0	2	24	55	127	7
Q11 Ability to listen	0	3	22	52	132	6
Q12 Explanations	1	3	28	61	115	7
Q13 Reassurance	1	4	31	57	115	7
Q14 Confidence in ability	0	1	27	53	124	10
Q15 Express concerns/fears	0	3	32	48	122	10
Q16 Respect shown	0	0	24	48	133	10
Q17 Time for visit	0	5	29	57	118	6
Q18 Consideration	0	2	30	66	106	11
Q19 Concern for patient	0	4	29	63	107	12
Q20 Self care	0	3	34	68	98	12
Q21 Recommendation	0	2	22	57	118	16
Q22 Reception staff	1	8	50	58	88	10
Q23 Respect for privacy/confidentiality	1	13	46	65	77	13
Q24 Information of services	0	10	51	60	75	19
Q25 Complaints/compliments	1	13	56	68	52	25
Q26 Illness prevention	0	11	57	73	54	20
Q27 Reminder systems	0	6	47	73	64	25
Q28 Second opinion / comp medicine	0	8	50	62	44	51

Blank/spoilt responses are not included in the analysis (see score explanation)



Your patient feedback

Table 2: Your mean percentage scores and benchmarks from all participating practices

	Your mean		Benchmark data (%)*				
	score (%)	National mean score (%)	Min	Lower quartile	Median	Upper quartile	Max
About the practice							
Q1 Opening hours satisfaction	73	67	44	62	66	71	99
Q2 Telephone access	66	64	24	56	64	72	99
Q3 Appointment satisfaction	71	69	37	64	69	74	99
Q4 See practitioner within 48hrs	56	65	25	57	65	72	99
Q5 See practitioner of choice	55	61	24	53	60	69	99
Q6 Speak to practitioner on phone	63	61	31	54	61	67	99
Q7 Comfort of waiting room	68	66	31	61	66	72	100
Q8 Waiting time About the practitioner	62	58	24	51	57	63	99
Q9 Satisfaction with visit	83	80	49	76	80	84	99
Q10 Warmth of greeting	87	81	50	78	82	86	99
Q11 Ability to listen	87	81	50	78	82	86	100
Q12 Explanations	84	80	49	77	81	84	100
Q13 Reassurance	84	79	49	75	79	83	100
Q14 Confidence in ability	87	82	50	79	83	86	100
Q15 Express concerns/fears	85	80	50	76	80	84	100
Q16 Respect shown	88	83	50	80	84	88	100
Q17 Time for visit	84	74	46	70	74	79	100
Q18 Consideration	84	78	48	74	78	82	100
Q19 Concern for patient	84	79	48	75	79	83	100
Q20 Self care	82	80	51	78	81	85	99
Q21 Recommendation	87	81	46	77	81	85	100
About the staff	77	77	40	72	76	81	99
Q22 Reception staff	75	76	40	72	76	80	100
Q23 Respect for privacy/confidentiality Q24 Information of services	76	78			78		
Finally	70	73	43	69	73	77	100
Q25 Complaints/compliments	71	66	42	62	66	71	100
Q26 Illness prevention	72	70	46	66	69	73	100
Q27 Reminder systems	76	68	43	63	67	72	99
Q28 Second opinion / comp medicine	72	68	44	63	67	72	99
Overall score	76	73	46	69	73	77	100

Your mean score for this question falls in the middle 50% of all means

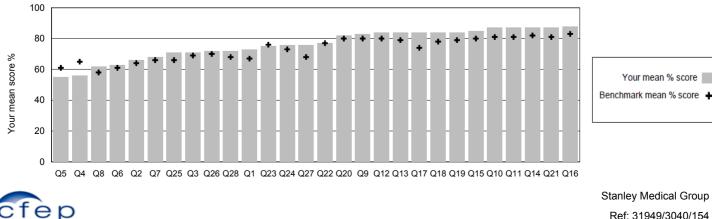
Your mean score for this question falls in the lowest 25% of all means

* Based on data from 3,027 practices surveyed between April 2008 and March 2011 with 25 or more responses.

- scores not illustrated if less than 5 patient responses

Please note the reliability of your patient feedback may be marginally reduced if less than 25 patient ratings per question is achieved (see table 1). In the event that there are less than 5 patient responses for any question, the corresponding score will not be illustrated. Please see the supporting documents at the end of this report for percentage score calculation and quartile information.

Graph 1: Your mean percentage scores in ascending order of performance with benchmark mean scores from all participating practices



Stanley Medical Group Ref: 31949/3040/154 February-2012

Your mean % score

Your patient feedback

Table 3: Mean percentage scores and benchmarks by practice list size (6001-8000 patients)

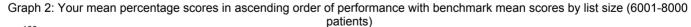
	Your mean		Bench	mark dat	a (%)*		
	score (%)	National mean score	Min	Lower quartile	Median	Upper quartile	Мах
About the practice							
Q1 Opening hours satisfaction	73	65	46	62	66	69	84
Q2 Telephone access	66	61	25	54	62	68	85
Q3 Appointment satisfaction	71	67	41	63	68	72	87
Q4 See practitioner within 48hrs	56	62	33	56	63	69	90
Q5 See practitioner of choice	55	57	32	51	58	63	85
Q6 Speak to practitioner on phone	63	59	36	54	59	64	80
Q7 Comfort of waiting room	68	65	39	60	66	71	90
Q8 Waiting time	62	55	32	51	55	60	79
About the practitioner							
Q9 Satisfaction with visit	83	79	49	76	80	84	93
Q10 Warmth of greeting	87	81	54	78	81	85	94
Q11 Ability to listen	87	81	56	78	82	86	95
Q12 Explanations	84	80	55	77	81	84	94
Q13 Reassurance	84	79	51	76	79	83	92
Q14 Confidence in ability	87	82	55	79	82	86	95
Q15 Express concerns/fears	85	80	51	77	80	83	92
Q16 Respect shown	88	83	61	81	84	87	95
Q17 Time for visit	84	73	47	70	74	78	94
Q18 Consideration	84	78	49	74	78	82	91
Q19 Concern for patient	84	79	50	75	79	83	93
Q20 Self care	82	80	62	77	80	84	91
Q21 Recommendation	87	81	46	78	81	85	95
About the staff							
Q22 Reception staff	77	75	45	72	75	79	91
Q23 Respect for privacy/confidentiality	75	74	47	71	75	78	90
Q24 Information of services	76	71	44	68	72	75	88
Q25 Complaints/compliments	71	65	43	62	65	68	83
Q26 Illness prevention	72	68	46	66	69	71	84
Q27 Reminder systems	76	66	46	63	67	70	84
Q28 Second opinion / comp medicine	72	66	48	63	67	70	85
Overall score	76	72	46	68	72	75	87

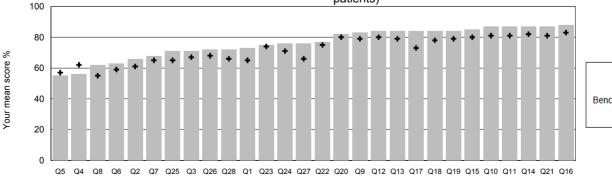
ligi

Your mean score for this question falls in the middle 50% of all means Your mean score for this question falls in the lowest 25% of all means

* Based on data from 517 practices surveyed between April 2008 and February 2011 with 25 or more responses. Please note the reliability of your patient feedback may be marginally reduced if less than 25 patient responses per question is achieved. In the event that there are less than 5 patient responses for any question, this score will not be illustrated.

See the supporting documents at the end of this report for percentage score calculation and quartile information.





Your mean % score Benchmark mean % score 🔸



Your patient feedback

Table 4: Your patient demographics

Number of patient responses by category, your mean percentage scores and benchmarks by practice list size (6001-8000 patients)

	Number of	Your mean	Benchmark data (%)*					
	responses	score (%)	National mean score (%)	Minimum	Lower Quartile	Median	Upper Quartile	Maximu
Age								
Under 25	8	77	69	45	65	69	74	87
25 - 59	109	77	71	48	67	71	75	86
60 +	82	76	75	46	71	75	78	93
Blank	16	74	70	39	65	70	76	95
Gender						•		
Female	121	77	71	45	68	72	75	87
Male	77	76	73	50	70	73	76	88
Blank	17	76	70	40	65	70	76	94
Visit usual practit	ioner							
Yes	103	78	74	49	71	74	77	88
No	75	74	68	46	64	68	72	83
Blank	37	78	70	45	66	70	75	93
Years attending								
< 5 years	38	77	72	48	68	72	76	90
5 - 10 years	17	79	71	52	67	72	76	87
> 10 years	139	76	72	50	69	73	76	88
Blank	21	74	70	42	65	71	75	91

* Based on data from 517 practices surveyed between April 2008 and February 2011 with 25 or more responses.

Demographic category mean percentage scores are calculated from all the ratings from all questions for that demographic group.

Please note the reliability of your patient feedback may be marginally reduced if less than 25 patient ratings per category is achieved. In the event that there are less than 5 patient responses for any question, the corresponding score will not be illustrated.

Please see the supporting documents at the end of this report for percentage score calculation and quartile information.



Your patient feedback

Table 5: Your current and previous mean percentage scores*

	01/12/2011	29/10/2008	29/10/2007	25/10/2006
Q1 Opening hours satisfaction	73	70	71	73
Q2 Telephone access	66	68	77	71
Q3 Appointment satisfaction	71	70	75	72
Q4 See practitioner within 48hrs	56	60	69	63
Q5 See practitioner of choice	55	68	73	70
Q6 Speak to practitioner on phone	63	61	68	67
Q7 Comfort of waiting room	68	63	69	74
Q8 Waiting time	62	54	56	63
Q9 Satisfaction with visit	83	78	80	81
Q10 Warmth of greeting	87	78	81	81
Q11 Ability to listen	87	77	82	79
Q12 Explanations	84	77	79	78
Q13 Reassurance	84	75	79	79
Q14 Confidence in ability	87	81	84	81
Q15 Express concerns/fears	85	78	81	78
Q16 Respect shown	88	81	84	82
Q17 Time for visit	84	69	70	74
Q18 Consideration	84	74	76	78
Q19 Concern for patient	84	75	77	77
Q20 Self care	82			
Q21 Recommendation	87	77	81	80
Q22 Reception staff	77	82	81	77
Q23 Respect for privacy/confidentiality	75	82	79	77
Q24 Information of services	76	77	75	74
Q25 Complaints/compliments	71	69	68	74
Q26 Illness prevention	72	77	73	76
Q27 Reminder systems	76	73	71	75
Q28 Second opinion / comp medicine	72	67	72	74
Overall score	76	72	74	75

- no data available, question introduced in October 2009. Please note that the scoring scale used to calculate the mean percentage scores was updated in October 2009 in line with feedback from practices and health professionals. This is explained in greater detail in the supporting documentation found at the end of this report. In this report any previous scores displayed will have been calculated using the new scale to be directly comparable with your current scores. *Dates in the table relate to date of application to carry out the survey.



Your patient feedback

All written patient comments have been included in their entirety but details which could identify a specific patient have been removed to ensure anonymity.

Comments about how the practice could improve

- Not always easy to see this doctor but altogether excellent surgery and all staff.
- Update on information screen often out of date. Not good.
- I am very pleased with my treatment and help from the doctor over the years, which has been a very difficult time for me and is still ongoing.
- More appointment times with chosen doctor so you do not have to wait longer than 48 hours for appointment time.
- It would be nice to get a doctor when you want one.
- Telephone system not good after waiting 15 minutes cut off then tried again to no avail.
- · Later opening hours.
- Maybe a few appointments should be kept back for people who fall ill and need to see a doctor that day.
- Excellent. Very friendly and helpful.
- No. Everything has always been fine for me.
- Longer appointment slots.
- Waiting time (too long).
- Thank you, everyone very helpful, more magazines maybe?
- When using the facilities overall it would be useful to have a small coffee bar or similar for waiting relatives.
- More people to answer phone.
- More comfortable seating please.
- Do more for a disabled person like doors open and close by themselves and tables to come low down. I know the x-ray machine is no good for a disabled person and cars parking over the ramp bit outside's a pain, other than this the practice is great.
- There is a lack of privacy at reception. I cannot understand why this was not considered when the building was built.
- None. Always first class.
- Telephone response needs looking into. It took 15 minutes and I still had not spoken to anyone so I hung up.
- More late night opening hours (after 5pm) for patients who work full time and have difficulty attending 9 5pm hours.
- I cannot make any negative comments other than we seem to have a lot of locums in service at present, does this mean the permanent team is not adequate to release GP's for other functions and rest periods.
- No improvement needed.
- Inform patients of results instead of saying if anything is wrong we will send for you.
- None, satisfactory.
- The '48 hour' to see a doctor is much better than before, although I requested to see one doctor and had to wait a week for an available appointment.
- Very supportive and helpful.
- Being able to get an appointment in 48 hours, had to wait a week and a half.
- Phone the results of tests. Not, if you are ok we will not contact you.
- TV is all about the practice and staff, more information of illness needed.



Your patient feedback

All written patient comments have been included in their entirety but details which could identify a specific patient have been removed to ensure anonymity.

Comments about how the practice could improve

- More privacy at reception desk.
- Service very good.
- This is the best practice I have ever used. Top marks.
- Excellent.

Comments about how the doctor/nurse could improve

- Have never had to ask for a second opinion so could not comment.
- Brilliant service, no problems.
- No, everything has always been alright for me.
- A really good listener, would love more time.
- Excellent and very supportive. Thank you!
- Always find service and appointments good, no change or improvements needed from my experience.
- To visit this particular GP on this day was booked well ahead. Lately I have been unable to visit this GP who I feel has been very helpful to me with my health and mental pressures.
- None. Satisfactory.
- Top bloke.
- I have faith in my doctor while I have seen her on my visits to the surgery.
- Service very good.
- Excellent.



Supporting documents

Number of patients providing feedback : 215

Supporting documents

Details of score calculation

The score provided for each question in this questionnaire is the mean (average) value of all of the ratings from all patients who completed the question. It is expressed as a percentage - so the best possible score is 100%.

Example using data from your Q1 Opening hours satisfaction

Total number of patients responses = 215

Questionnaire rating scale	Poor	Fair	Good	Very Good	Excellent	Blank/spoilt
Number of ratings	0	7	60	88	57	3
Value assigned to each rating	0	25	50	75	100	n/a

(number of Poor ratings x 0) + (number of Fair ratings x 25) +(number of Good ratings x 50) + (number of Very Good ratings x 75) + (number of Excellent ratings x 100)

 $(0 \times 0) + (7 \times 25) + (60 \times 50) + (88 \times 75) + (57 \times 100)$ = 15,475/212

(215 - 3)

(Total number of patient responses - number of blank/spoilt)

Your mean percentage score for Q1 = 73%

Please note that the scoring scale used to calculate the mean percentage scores was updated in October 2009 in line with feedback from practices and health professionals. Prior to this time a -33 to 100 scale was used, where poor = -33.3333%, fair = 0%, good = 33.3333%, very good = 66.6667% and excellent = 100%.

Explanation of quartiles

In statistics a quartile is any one of the three values that divide data into four equal parts, each part represents 1/4 of the sampled population.

Quartiles comprise:

Lower quartile, below which lies the lowest 25% of the data

The median, cuts the data set in half

Upper quartile, above which lies the top 25% of the data

Please note that the benchmarks presented in this report are based on data obtained from a volunteer sample of practices, and as such may be artificially high.

Question	Your mean		Bend	hmark dat	a (%)*	
	score (%)	Min	Lower quartile	Median	Upper quartile	Max
Q1 Opening hours satisfaction	73	44	62	66	71	99

* Based on data from 3,027 practices surveyed between April 2008 and March 2011 with 25 or more responses.



Supporting documents

Page by page guide to the interpretation of your report

Page 1

The frequency distribution table (table 1) shows the number of patient ratings from poor to excellent and the number of 'blank/spoilt' responses for every question (a blank response is where a patient did not respond to the question and a spoilt response is where more than one tick box option was chosen or if the questionnaire was defaced). If these values are added up, for any one question, this will equate to the total number of patients surveyed (shown in the top right hand corner of the page). This table clearly shows the degree of satisfaction patients have with each aspect of the practice considered. Please note the spread of the ratings. Are they widely spread or closely packed around one or two specific ratings? One or two higher or lower ratings can make a big difference to your mean percentage scores illustrated in tables 2 and 3.

Page 2

The mean percentage score and benchmark table (table 2) illustrates your mean percentage scores for each question calculated from the data in table 1. Each score is the mean (average) score calculated from valid patient ratings (i.e. not the blank/spoilt responses) expressed as a percentage (see score calculation sheet also in the supporting document section of your report). It has been established by our statisticians that the reliability of your patient feedback for any one question may be marginally reduced if less than 25 valid patient responses is achieved (this number can be determined from table 1). In the event that there are less than 5 patient responses, the corresponding score for the question will not be illustrated.

Your scores have been displayed in colour coded boxes to indicate how your score falls within the benchmark data (within the highest 25%, the middle 50% or the lowest 25% of all the mean percentage scores achieved by all practices in the benchmark sample). The provenance of the benchmark data is provided in the footer below the table.

Graph 1 illustrates your mean percentage scores in ascending order of performance with benchmark means from all participating practices.

Page 3

Table 3 and graph 2 are the same as for page 2, but with benchmarks provided relevant to your practice list size. Evidence indicates that practices with smaller list sizes tend to perform better than those with larger list sizes. Page 4

Table 4 shows the number of patient responses from each 'demographic' group detailed on the questionnaire i.e. age, gender, if the patient saw their usual practitioner or not and the number of years attending the practice. Demographic category mean percentage scores are calculated from all the ratings from all questions for that demographic group. Associated benchmark mean scores relevant to your practice list size are also provided.

The same criteria concerning reliability of the feedback as explained in Page 2 above applies.

Page 5

Table 5 lists your current scores for each question together with scores from your last 3 surveys (if applicable) for comparison.

Page 6

Patient comments usually reflect scores achieved. The IPQ was designed to simulate the patient's chronological journey through their visit to the practice. Although the questions in the IPQ are generic, comments can pinpoint specific issues identified by the patient from any part of this journey. If there is a particular problem within the practice e.g. getting through in the morning on the telephone or the lack of chairs in the waiting room suitable for the elderly, this can be clearly picked up in the themes and frequency of comments.

In order to ensure patient anonymity, any personal identifiers are removed. In the unlikely event that we receive a written comment which might relate to serious professional misconduct (e.g. allegations of sexual assault), the comment would be referred to our Clinical Associate who would discuss the matter with you.



Improving Practice Questionnaire



Org ID Survey ID Practitioner ID

You can help this general practice improve its service

- · This practice would welcome your honest feedback
- Please read and complete this survey after you have seen the
- No-one at the practice will be able to identify your personal responses
- Once completed, please return this survey to reception in the envelope provided

Please mark the box like this 🗹 with a ball point pen. If you change your mind just cross out your old response and make your new choice.

When giving your feedback, please only consider the consultation you have had today.

Abo	out the practice	Poor	Fair	Good	Very good	Excellent
1	Your level of satisfaction with the practice's opening hours					
2	Ease of contacting the practice on the telephone					
3	Satisfaction with the day and time arranged for your appointment					
4	Ghances of seeing a doctor/nurse within 48 hours					
5	Chances of seeing a doctor/nurse of your choice					
6	Opportunity of speaking to a doctor/nurse on the telephone when necessary					
7	Gomfort level of waiting room (e.g. chairs, magazines)			ØN		
8	Length of time waiting in the practice	AMI			- 7.(OPT
Abo	Opportunity of speaking to a doctor/nurse on the telephone when necessary Comfort level of waiting room (e.g. chairs, magazines) Length of time waiting in the practice Sout the doctor/nurse (whom you have just seen) My overall satisfaction with this visit to the doctor/nurse is EAS The warmth of the doctor/nurse's greeting to me was On this visit I would rate the doctor/nurse's ability to really listen to me as The doctor/nurse's explanations of things to me were	Boor)0		Very good	Excellent
9	My overall satisfaction with this visit to the doctor/nurse is EAS					
10	The warmth of the doctor/nurse's greeting to me was					
11	On this visit I would rate the doctor/nurse's ability to really listen to me as					
12	The doctor/nurse's explanations of things to me were					
13	The extent to which I felt reassured by this doctor/nurse was					
14	My confidence in this doctor/nurse's ability is					
15	The opportunity the doctor/nurse gave me to express my concerns or fears was					
16	The respect shown to me by this doctor/nurse was					
17	The amount of time given to me for this visit was					
				Ple	ase turn o	over 5



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About the doctor	Inurse (continued	.) 040sb	Poor	Fair	Good	Very good	Excellent
18 This doctor/nurse deciding a treatm	's consideration of my pe ent or advising me was	ersonal situation in					
19 The doctor/nurse	's concern for me as a pe	erson on this visit was					
20 The extent to whi myself was	ch the doctor/nurse help	ed me to take care of					
21 The recommendation doctor/nurse would	tion I would give to my fi Id be	riends about this					
About the staff			Poor	Fair	ON	y y good	Excellent
22 The manner in wh	nich you were treated by	the reception staff	MP	15		PC)PY
23 Respect shown for	or your privacy and confi	dentiality			1 0 1	4	
24 Information provid prescriptions, test results	ded by the practice abou , cost of private certificates etc)	t its service (e.g. repeat	ED	4			
Finally		the reception staff dentiality t its service (e.g. repeat PLEAS	Poor	Fair	Good	Very good	Excellent
	or making compliments or service and quality of ca	or complaints to this					
26 The information p illness and stay h	rovided by this practice a ealthy (e.g. alcohol use, health r	about how to prevent risks of smoking, diet habits etc)					
27 The availability ar health checks is	nd administration of remi	nder systems for ongoing					
28 The practice's res complementary m	spect of your right to see nedicine was	k a second opinion or					
Any comments about	how this practice could i	improve its service?					
Any comments about	how the doctor/nurse co	uld improve?					
The following questi	ons provide us only with survey. No one at the p	general information about ractice will be able to identi	the range o fy your pers	f people v sonal resp	vho have re onses.	espondea	l to this
How old are you in years?	Are you:	Was this visit with	How many ye been attendir	ears have y	/ou		
Under 25	Female	Yes	_	han 5 yea			
25-59	Male	No	5-10 y	ears			

More than 10 years

Thank you for your time and assistance

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Guidance template for discussion of local survey findings and action plan for 2011/2012 and 2012/2013

Completing this form will help you meet the requirements of the patient participation directed enhanced service (DES) for GMS contract (April 2011). Please retain this form for future reference and to present to your PCT if required.

PART 1: 2011/2012 A. Discussion of local practice survey findings

1. Patient reference group (PRG) members present:

2. Practice staff (and designation) present:

 Please state your key findings from this local survey – look at the report as a whole to include written patient comments in order to obtain a complete picture of performance (see guidance in the introduction of the report).



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5. Which responses were least positive?

6. In which areas did you deviate most from the national benchmark? Can you explain why this might be?

7. What are the main priorities identified by the PRG?

8. What are the main priorities identified by practice staff?





B. Action plan: 2011/2012

Which areas did you mutually agree as priorities for action and intervention? Please complete the table below.

Priority for action	Proposed changes	Who needs to be involved?	What is an achievable time frame?

Does your PCT (or similar body) need to be contacted?

(This would only be the case if a practice proposes significant change and PRG agreement has not been obtained. Changes which impact on contractual arrangements also need to be agreed with the PCT).

	Your details	
Name:	Practice address:	
Job title:		
Practice name:	PCT (or similar body name):	
Your signature:		



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PART 2: 2012/2013

(To be completed after completion of second survey)

A. Discussion of local practice survey findings

1. Patient reference group (PRG) members present:

2. Practice staff (and designation) present:

3.	What activities have you undertaken to address issues raised by your last survey
	which were deemed as priority by your PRG and your practice staff?

Patient experience issue	What has been done to address this?

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4. Do the results of this survey reflect these activities? (Please look at the report as a whole to fully determine this).

5. In which areas have you seen most change?				
	Last survey (2011/2012)	This survey (2012/2013)		

6. What are the main priorities identified by the PRG? (These may be the same as for the last survey or other areas may now be deemed more significant).

7. What are the main priorities identified by practice staff?

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B. Action plan: 2012/2013

Which areas did you mutually agree as priorities for action and intervention? Please complete the table below.

Proposed changes	Who needs to be involved?	What is an achievable time frame?
	Proposed changes	

Does your PCT (or similar body) need to be contacted?

(This would only be the case if a practice proposes significant change and PRG agreement has not been obtained. Changes which impact on contractual arrangements also need to be agreed with the PCT).

Your details				
Name:	Practice address:			
Job title:				
Practice name:	PCT (or similar body name):			
Your signature:				



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Feedback Form



At CFEP UK Surveys, we are continually striving to improve our service and would welcome any feedback you can give us so we can use this to shape our future work programme and support services.

	Poor	Fair	Good	Very good	Excellent
1(a). Please rate your overall experience of carrying out this survey					
1(b). Please comment on what you feel were the positive	e aspects of	the survey			
1(c). Please comment on any aspects of the survey which	ch you feel co	ould be impro	ved		

	Not useful	Fairly Useful	Useful	Very useful
2(a). How useful did you find the feedback report?				

2(b). Please comment below on your response in 2(a)		
	Yes	No
3(a). Did the results of your survey encourage you to make any changes to your practice?		

3(b). Please comment below on your response in 3(a)

Thank you for your feedback. Please return this form to:-CFEP UK Surveys,1 Northleigh House,Thorverton Road,Matford Business Park,Exeter,EX2 8HF

Please tick here if you do not wish for us to contact you regarding the service we have provided for you.
We may wish to use the information you have provided as anonymous quotations. If you would prefer us not to use the information you have provided in this way, please tick here.



This is to certify that

Stanley Medical Group

Stanley Primary Care Centre Clifford Road Stanley County Durham DH9 0AB

Practice List Size: 6500 Surveys Completed: 215

has completed the

Improving Practice Questionnaire

Completed on 16 February 2012

Michael freco.

Michael Greco Director



Thank you to all patients who participated in this survey. By letting the practice know your views, positive changes can be made for the benefit of all patients.