

See distribution

## **Crown Heights Medical Centre – Improving Practice Questionnaire**

### **Introduction**

1. Crown Heights Medical Centre, formerly Church Grange Medical Centre has undertaken practice questionnaires for 2005/06, 2006/07, 2007/08 and 2008/09. This report is based upon the analysis of the past four years, with a particular focus on the results in Table 1 of the report which illustrates the distribution and frequency of scores. This report aims to inform the practice and patients of our response to the actual survey. Despite the fact that the practice seems to remain in the lower quartile, we are somewhat upbeat at the significant improvement from 2008.
2. As with all surveys of this kind, there is a requirement for some intelligent interpretation of the results and in this particular case, following on from the very poor performance in 2008, which we have mainly attributed to the impact upon our patients following the move from Bramblys Drive, it is encouraging to note that our performance has improved.
3. The practice were very disappointed that the numbers surveyed did not reflect a sufficient or similar number to match our population. 500 blank survey forms were despatched at random to patients by post and a further 500 placed in reception and GP consulting rooms: all of which contained a reply paid envelope. Effectively 5% of the registered population were canvassed, yet only 40% of these were returned completed. We extended the period of time for the survey, but eventually the practice were forced to accept that it could delay no longer and had to despatch it to the research body to formulate our report.
4. The practice has always allowed its patients to be selected at random and has avoided the potentially much more advantageous method used by some practices of GP's selecting patients who they know will respond positively.

### **Scoring and Comparison**

5. In regards to overall scoring, the actual overall practice scores and numbers surveyed are as below:

	2008/09	2007/08	2006/07	2005/06
Overall Practice Score	59%	50%	58%	46%
Number Surveyed	399	481	608	512

An analysis of the scores achieved is at Appendix 1, with individual scores for the reporting years at Annex A, B, C and D for the relevant years.

5. Previous concerns regarding the reported poor staff performance have been somewhat allayed in questions 21 to 23, where the practice still believes that practice staff took the brunt of the patient's anxieties and angst surrounding the move to our new premises.

6. Our performance in 2009 has improved in 21 out of 27 areas over the 2008 report and an improvement in 23 of the 27 areas over the 2006 report. We believe that this improvement demonstrates our commitment to responding to our patients feedback. More importantly we believe that now that the practice is established at Crown Heights, patients have become more satisfied.
7. Each individual area has been assessed and the practice response is as below:

**Q1. The Level of satisfaction with the practice's opening hours (Q1) Overall satisfaction 96.09% (Improvement of 34.75%)**

We were very disappointed at last year's feedback particularly as the practice had expanded its hours to 08:00 to 18:30 and this year through to 19:30 Monday to Thursday and from 07:30 on Friday. We do not believe that extending our hours to 19:30 and from 07:30 have achieved this significant improvement, rather that patients are no longer dissatisfied with our new location.

**Action Identified:**

None at present other than to continue monitoring attendance for extended hours sessions and to review whether to commence working on Saturday morning (comment made from 1 patient).

**Q2. Ease of Contacting the Practice on the telephone - (42.87% more satisfied than 2008 and 29.50% more satisfied than 2007). Overall satisfaction 84.50%**

There has been a significant improvement in the feedback, which is not due to significant change in the method of which telephone calls are dealt with. The practice management team have monitored the system remotely and have identified that during peak periods of demand, even if the practice doubled the number of staff answering the telephone (4 to 8) it would not significantly improve access times. One male patient 60+ felt *"Should have more staff to attend telephone queries. Need more telephone lines"*. **The practice now has 12 incoming lines 5 more and 2.8 more administration staff, than at Church Grange.** Cost is a major issue.

**Action Identified:**

To continue to monitor the system via the remote software and to investigate whether patients could be persuaded to not contact the surgery during the peak 08:00 to 09:00 period.

**Q3. Satisfaction with the day and time arranged for your appointment - (15.76% more satisfied than 2008 and 8.11% more satisfied than 2007). Overall satisfaction 94.09%**

The practice has improved access considerably through the implementation and expansion of its rapid access system and from the addition of a further 1.6 Whole

Time Equivalent (WTE) GPs, plus the existing GP's increasing their collective appointments by a further 154 per week.

**Action identified:**

The practice is currently in the process of re-allocating the associates (salaried doctor) resource into rapid access, which should satisfy patient's desire to see their own registered doctor.

**Q4. Chances to see a doctor/nurse within 24/48 hours (2.42% more satisfied than 2008). Overall satisfaction 91.21% satisfied**

We feel that we offer an excellent service to our patients allowing them as near to immediate access as can be achieved, with patients able to walk in and wait for an appointment. We believe that this question is misinterpreted by our patients as being able to see their own doctor within 24/48 hours.

**Action Identified:**

Article for practice newsletter and to increase the profile of this element of the practice website (which has over 2000 hits per month).

**Q5. Chances to see Doctor/Nurse of your choice within 24/48 hours (2.89% more dissatisfied than 2008). Overall satisfaction 80.83% satisfied**

**Action Identified:**

After increasing appointments in year, the planned action as per Q3 should help to improve this area.

**Q6. Opportunity to speak to a doctor/nurse on the telephone when necessary (0.22% more satisfied than 2008). Overall satisfaction 92.23% satisfied**

We continue to offer this facility via rapid access and on demand for individual doctors.

**Action Identified:**

Newsletter article and raise profile on the website as per Q4.

**Q7. Comfort level of waiting room (e.g. chairs, magazines) (1.81% more satisfied than 2008). Overall satisfaction 96.7% satisfied.**

The introduction of music may have influenced this slight improvement. One patient did make comment that the waiting room needed to be redecorated. We disagree!

**Q8. Length of time waiting in the practice (1.85% more dissatisfied than 2008). Overall satisfaction 87.96% satisfied.**

Patients are taking longer over consultations than in previous years, primarily due to the number of new patients registering at the practice and also due to the varied ethnic and language mix brought about by the influx of new patients. The practice has responded by increasing the choice of doctors and in particular the number of languages now spoken at the practice.

**Q9. My overall satisfaction with this visit to the doctor is....(Q9) - (1.28% more satisfied than 2008). Overall satisfaction 97.95% satisfied**

Overall satisfaction is good, but it is acknowledged that there is room for improvement. Direct comments registered are for example "he spent more time looking at his watch....."

**Q10. The warmth of the doctor/nurse's greeting to me was.... (Q10) - (2.72% more satisfied than 2008). Overall satisfaction 98.96% satisfied**

No comment other than we will seek to improve. Patients often attend in a negative frame of mind due to their illness.

**Q11. On this visit I would rate the doctor/nurse's ability to listen to me as really... (0.96% more satisfied than 2008) Overall satisfaction 98.43%% satisfied**

No comment other than we will seek to improve.

**Q12. The doctor/nurses explanations of things to me were.... - (Q12) - (0.43% more dissatisfied than 2008) Overall satisfaction 97.90% satisfied**

No comment other than we will seek to improve.

**Q13. My confidence in this doctor/nurse's ability is.... (1.17% more dissatisfied than 2007) Overall satisfaction 96.83% satisfied**

No comment other than we will seek to improve.

**Q14. Confidence in Ability... (0.74% more satisfied than 2008) Overall satisfaction 98.43% satisfied**

No comment other than we will seek to improve.

**Q15. The opportunity the doctor/nurse gave me to express my concerns or fears was... - (Q15) – (1.43% more satisfied than 2008) Overall satisfaction 97.65% satisfied**

No comment other than we will seek to improve.

**Q16. The respect shown to me by this doctor/nurse was... - (2.39% more satisfied than 2008) Overall satisfaction 98.41% satisfied**

No comment other than we will seek to improve.

**Q17. The amount of time given to me for this visit was – (1.48% more dissatisfied than 2008) Overall satisfaction 95.36% satisfied**

This response might be due to the same reasons as Q8. We offer 10 minute routine appointments to our patients and invite them to make longer appointments if they feel it necessary.

**Action Identified:**

Newsletter article and raise profile on the website as per Q4.

**Q18. This doctor/nurse's consideration of my personal situation in deciding or a treatment of advising me was... - (0.84% more satisfied than 2008) Overall satisfaction 97.66% satisfied**

No comment other than we will seek to improve.

**Q19. The doctor's concern for me as a person on this visit was (0.74% more dissatisfied than 2008) - Overall satisfaction 96.61% satisfied**

No comment other than we will seek to improve.

**Q20. The recommendations I would give to my friends about this doctor would be (1.22% more satisfied than 2008) - Overall satisfaction 96.61% satisfied**

No comment other than we will seek to improve.

**Q21. The manner which you were treated by the reception staff - (29.59% more satisfied than 2008) - Overall satisfaction 94.01% satisfied**

Our greatest improvement over the year. Our reception staff were extremely disappointed and demoralised last year when they were made aware of the overall levels of patient dissatisfaction in their performance. As in other areas, it was felt that our move to new premises had also effected this element of the patient feedback. Perhaps more significant and as a result of the reception staff efforts, the practice has also improved in patient satisfaction 4.67% over our 2007 survey. Comments made about our staff include "*receptionists are lovely and friendly*", *extremely please at the caring and sensitive way I was dealt with*".

**Action Identified:**

Inform the reception staff of their achievement and the need to continue the good work

**Q22. Respect shown for your privacy and confidentiality – (31.33% more satisfied than 2007) Overall satisfaction 78.01% satisfied**

Much work has been undertaken in this regard, however, there will always be issues in regard layout of the main waiting area and reception.

**Action identified:**

To continue with staff training

**Q23. Information provided by the practice about its services (e.g. repeat prescriptions, test results, cost of private certificates etc) – (14.38% more satisfied than 2008) Overall satisfaction 94.68% satisfied**

No comment other than we will seek to improve.

**Q24. The opportunity for making complaints or compliments to the practice about its services and quality of care - (2.37% more satisfied than 2008) Overall satisfaction 94.04% satisfied**

The practice has a robust complaints procedure and actively encourages patients to complain if they feel it necessary – this is widely publicised. Any informal complaints made are immediately passed to the practice manager to address and we have addressed all complaints made within the year to the complainants satisfaction.

**Q25. The information provided by this practice about how to prevent illness and stay healthy (e.g. alcohol use, health risks of smoking, diet habits etc) – (Q25) – (31.02% more dissatisfied than 2008) - Overall satisfaction 94.64% satisfied.**

The practice does routinely provide advice to patients via its website, practice leaflet notice boards, practice newsletters and VDU display systems as well as during health checks etc.

**Q26. The availability and administration of reminder systems for ongoing health checks is.... - (5.99% more satisfied than 2008) - Overall satisfaction 92.80% satisfied.**

The practice has a robust system of recall for all QOF disease groups etc and endeavours to ensure that patients are reminded of the need to attend. A recent example of a new service is that of provision of HPV vaccine. The practice employs the use of routine mail and SMS messages, yet still patients who have received 2 or more reminders fail to respond. Similarly for QOF, we have a reasonably high level of patients who have been excepted from the survey, but only if they have ignored three letters. One 60+ male commented *“The practice is forward thinking. Gives reminders of clinics well in advance e.g. diabetic etc. Excellent.....”*

A recent experiment to telephone patients to remind them of the need to be vaccinated against influenza and to ascertain whether they wished to take advantage of smoking cessation advice was not deemed a great success.

## Conclusion

8. Overall the practice has performed better than in 2008 , however we are concerned that we still remain in the lower quartile nationally. Patients remain dissatisfied about car parking, but this has been addressed and the practice has access via a pedestrian bridge to 260 car parking spaces – a level walk of 50 metres and over 2500 parking spaces in the car park itself. We are now in an excellent position for patient access, with car parking to cope with all of our needs and more, combined with being co-terminus with both the bus, railway and main taxi rank for the town.
8. The Partners and staff at Crown Heights Medical Centre are far from complacent and believe that they have been extremely proactive in trying to provide a good service to the residents of Basingstoke. In essence, whilst much of the survey and text feedback that we have received is negative, primarily it appears focussed upon parking and telephony issues: the parking has now addressed. In regard to telephony issues, we have improved this year and we await the outcome of our initiative to persuade the patients to call for routine information outside of peak hours. Perhaps within every cloud there is a silver lining as described by one female patient aged between 25-59 *“Very good practice. I don’t think there’s any way that they can do more”*.
9. An Action Plan is attached at Appendix 2.

Stefan Morawiec  
Practice Manager  
5<sup>th</sup> June 2009

Appendix:

1. Feedback
2. Action Plan
- 3.

Distribution:

External:

Hampshire PCT

Internal:

Partners  
Salaried Doctors  
Nursing Staff  
Management Team  
Administrative and Reception Staff – Crown Heights and Lychpit Surgery

## Overall Performance for 4 years – where blue is an improvement on previous years

Criteria	2009		2008		2007		2006		
	Dissatisfied	Satisfied	Dissatisfied	Satisfied	Dissatisfied	Satisfied	Dissatisfied	Satisfied	
Q1	Opening Hours satisfaction	3.91%	96.09%	38.66%	61.34%	12.09%	87.91%	12.90%	87.10%
Q2	Telephone Access	15.50%	84.50%	58.37%	41.63%	35.00%	65.00%	49.11%	50.89%
Q3	Patient Satisfaction	5.91%	94.09%	21.67%	78.33%	14.02%	85.98%	17.23%	82.77%
Q4	See Practitioner within 24 hrs	8.79%	91.21%	11.21%	88.79%	23.23%	76.77%	28.26%	71.74%
Q5	See practitioner of Choice	19.17%	80.83%	16.38%	83.62%	37.16%	62.84%	43.00%	57.00%
Q6	Speak to practitioner on phone	7.77%	92.23%	7.99%	92.01%	23.41%	76.59%	30.32%	69.68%
Q7	Comfort of waiting room	6.77%	93.23%	8.58%	91.42%	29.02%	70.98%	55.20%	44.80%
Q8	Waiting time	12.04%	87.96%	11.89%	88.11%	31.59%	68.41%	50.90%	49.10%
Q9	Satisfaction with Visit	2.05%	97.95%	3.33%	96.67%	2.18%	97.82%	4.82%	95.18%
Q10	Warmth of greeting	1.04%	98.96%	3.76%	96.24%	2.01%	97.99%	2.80%	97.20%
Q11	Ability to listen	1.57%	98.43%	2.51%	97.49%	2.04%	97.96%	3.20%	96.80%
Q12	Explanations	2.10%	97.90%	1.67%	98.33%	1.19%	98.81%	4.84%	95.16%
Q13	Reassurance	3.17%	96.83%	2.10%	97.90%	2.54%	97.46%	4.71%	95.29%
Q14	Confidence in ability	1.57%	98.43%	2.31%	97.69%	2.03%	97.97%	2.83%	97.17%
Q15	Express concerns	2.35%	97.65%	3.78%	96.22%	2.05%	97.95%	5.45%	94.55%
Q16	Respect shown	1.59%	98.41%	3.98%	96.02%	1.34%	98.66%	2.82%	97.18%
Q17	Time for visit	4.64%	95.36%	3.16%	96.84%	6.12%	93.88%	13.03%	86.97%
Q18	Consideration	2.34%	97.66%	3.18%	96.82%	3.13%	96.87%	6.54%	93.46%
Q19	Concern for patient	3.39%	96.61%	2.55%	97.45%	3.42%	96.58%	7.06%	92.94%
Q20	Recommendation	1.54%	98.46%	2.76%	97.24%	3.08%	96.92%	6.54%	93.46%
Q21	Reception staff	5.99%	94.01%	34.58%	65.42%	10.66%	89.34%	23.76%	76.24%
Q22	Respect shown	21.99%	78.01%	52.32%	47.68%	8.50%	91.50%	20.79%	79.21%
Q23	Information of services	5.32%	94.68%	19.70%	80.30%	12.85%	87.15%	27.76%	72.24%
Q24	Complaints/Compliments	5.96%	94.04%	8.33%	91.67%	15.26%	84.74%	29.18%	70.82%
Q25	Illness Prevention	5.36%	94.64%	36.38%	63.62%	9.11%	90.89%	20.05%	79.95%
Q26	Reminder Systems	7.20%	92.80%	13.19%	86.81%	13.72%	86.28%	25.20%	74.80%
Q27	Second opinion/complimentary medicine	4.69%	95.31%	10.85%	89.15%	10.90%	89.10%	22.90%	77.10%

<b>Survey Results 2008/09</b>		Blank	Poor	Fair	Good	Very Good	Excellent	Total	Dissatisfied	Satisfied
Q1	Opening Hours satisfaction	15	1	14	148	132	89	384	3.91%	96.09%
Q2	Telephone Access	12	14	46	167	114	46	387	15.50%	84.50%
Q3	Patient Satisfaction	10	2	21	111	155	100	389	5.91%	94.09%
Q4	See Practitioner within 24 hrs	12	7	27	107	139	107	387	8.79%	91.21%
Q5	See practitioner of Choice	13	17	57	137	120	55	386	19.17%	80.83%
Q6	Speak to practitioner on phone	26	3	26	119	143	82	373	7.77%	92.23%
Q7	Comfort of waiting room	15	5	21	114	149	95	384	6.77%	93.23%
Q8	Waiting time	17	5	41	119	163	54	382	12.04%	87.96%
Q9	Satisfaction with Visit	8	0	8	123	163	97	391	2.05%	97.95%
Q10	Warmth of greeting	16	0	4	106	168	105	383	1.04%	98.96%
Q11	Ability to listen	17	0	6	114	145	117	382	1.57%	98.43%
Q12	Explanations	18	1	7	84	160	129	381	2.10%	97.90%
Q13	Reassurance	20	1	11	83	155	129	379	3.17%	96.83%
Q14	Confidence in ability	18	0	6	85	146	144	381	1.57%	98.43%
Q15	Express concerns	16	0	9	99	171	104	383	2.35%	97.65%
Q16	Respect shown	22	0	6	103	147	121	377	1.59%	98.41%
Q17	Time for visit	11	0	18	121	141	108	388	4.64%	95.36%
Q18	Consideration	15	0	9	132	156	87	384	2.34%	97.66%
Q19	Concern for patient	16	0	13	99	171	100	383	3.39%	96.61%
Q20	Recommendation	10	0	6	109	151	123	389	1.54%	98.46%
Q21	Reception staff	15	2	21	168	140	53	384	5.99%	94.01%
Q22	Respect shown	17	25	59	126	104	68	382	21.99%	78.01%
Q23	Information of services	23	2	18	120	166	70	376	5.32%	94.68%
Q24	Complaints/Compliments	30	2	20	162	146	39	369	5.96%	94.04%
Q25	Illness Prevention	26	1	19	156	153	44	373	5.36%	94.64%
Q26	Reminder Systems	24	5	22	145	146	57	375	7.20%	92.80%
Q27	Second opinion/complimentary medicine	58	2	14	144	135	46	341	4.69%	95.31%

<b>Survey Results 2007/08</b>		Blank	Poor	Fair	Good	Very Good	Excellent	Total	Dissatisfied	Satisfied
Q1	Opening Hours satisfaction	6	63	121	210	68	14	476	38.66%	61.34%
Q2	Telephone Access	3	120	159	123	54	22	478	58.37%	41.63%
Q3	Patient Satisfaction	1	10	94	253	92	31	480	21.67%	78.33%
Q4	See Practitioner within 24 hrs	8	14	39	244	139	37	473	11.21%	88.79%
Q5	See practitioner of Choice	11	14	63	219	141	33	470	16.38%	83.62%
Q6	Speak to practitioner on phone	18	4	33	200	181	45	463	7.99%	92.01%
Q7	Comfort of waiting room	3	5	36	204	181	52	478	8.58%	91.42%
Q8	Waiting time	10	7	49	191	186	38	471	11.89%	88.11%
Q9	Satisfaction with Visit	1	2	14	192	166	106	480	3.33%	96.67%
Q10	Warmth of greeting	2	3	15	138	204	119	479	3.76%	96.24%
Q11	Ability to listen	2	2	10	121	206	140	479	2.51%	97.49%
Q12	Explanations	3	3	5	124	215	131	478	1.67%	98.33%
Q13	Reassurance	4	2	8	116	207	144	477	2.10%	97.90%
Q14	Confidence in ability	4	2	9	103	204	159	477	2.31%	97.69%
Q15	Express concerns	5	2	16	101	214	143	476	3.78%	96.22%
Q16	Respect shown	4	2	17	116	194	148	477	3.98%	96.02%
Q17	Time for visit	7	1	14	180	149	130	474	3.16%	96.84%
Q18	Consideration	10	2	13	82	243	131	471	3.18%	96.82%
Q19	Concern for patient	10	2	10	65	133	261	471	2.55%	97.45%
Q20	Recommendation	10	2	11	96	188	174	471	2.76%	97.24%
Q21	Reception staff	1	89	77	178	98	38	480	34.58%	65.42%
Q22	Respect shown	7	109	139	113	68	45	474	52.32%	47.68%
Q23	Information of services	9	22	71	274	68	37	472	19.70%	80.30%
Q24	Complaints/Compliments	37	9	28	190	192	25	444	8.33%	91.67%
Q25	Illness Prevention	22	20	147	182	77	33	459	36.38%	63.62%
Q26	Reminder Systems	26	5	55	264	101	30	455	13.19%	86.81%
Q27	Second opinion/complimentary medicine	57	2	44	266	86	26	424	10.85%	89.15%

<b>Survey Results 2006/07</b>		Blank	Poor	Fair	Good	Very Good	Excellent	Total	Dissatisfied	Satisfied
Q1	Opening Hours satisfaction	4	4	69	227	199	105	604	12.09%	87.91%
Q2	Telephone Access	8	59	151	171	146	73	600	35.00%	65.00%
Q3	Patient Satisfaction	9	15	69	210	182	123	599	14.02%	85.98%
Q4	See Practitioner within 24 hrs	14	42	96	171	157	128	594	23.23%	76.77%
Q5	See practitioner of Choice	16	67	153	161	141	70	592	37.16%	62.84%
Q6	Speak to practitioner on phone	57	27	102	191	142	89	551	23.41%	76.59%
Q7	Comfort of waiting room	5	40	135	236	145	47	603	29.02%	70.98%
Q8	Waiting time	16	37	150	237	127	41	592	31.59%	68.41%
Q9	Satisfaction with Visit	12	2	11	128	218	237	596	2.18%	97.82%
Q10	Warmth of greeting	10	1	11	108	219	259	598	2.01%	97.99%
Q11	Ability to listen	19	3	9	111	222	244	589	2.04%	97.96%
Q12	Explanations	18	1	6	144	222	217	590	1.19%	98.81%
Q13	Reassurance	17	3	12	138	219	219	591	2.54%	97.46%
Q14	Confidence in ability	16	2	10	97	207	276	592	2.03%	97.97%
Q15	Express concerns	23	3	9	135	214	224	585	2.05%	97.95%
Q16	Respect shown	11	1	7	93	206	290	597	1.34%	98.66%
Q17	Time for visit	20	1	35	175	211	166	588	6.12%	93.88%
Q18	Consideration	33	2	16	154	206	197	575	3.13%	96.87%
Q19	Concern for patient	24	1	19	154	184	226	584	3.42%	96.58%
Q20	Recommendation	23	1	17	127	189	251	585	3.08%	96.92%
Q21	Reception staff	17	15	48	184	195	149	591	10.66%	89.34%
Q22	Respect shown	20	14	36	164	208	166	588	8.50%	91.50%
Q23	Information of services	32	22	52	179	192	131	576	12.85%	87.15%
Q24	Complaints/Compliments	110	8	68	209	147	66	498	15.26%	84.74%
Q25	Illness Prevention	48	4	47	205	205	99	560	9.11%	90.89%
Q26	Reminder Systems	54	18	58	192	185	101	554	13.72%	86.28%
Q27	Second opinion/complimentary medicine	177	7	40	176	142	66	431	10.90%	89.10%

<b>Survey Results 2005/06</b>		Blank	Poor	Fair	Good	Very Good	Excellent	Total	Dissatisfied	Satisfied
Q1	Opening Hours satisfaction	8	6	59	266	130	43	504	12.90%	87.10%
Q2	Telephone Access	7	90	158	153	77	27	505	49.11%	50.89%
Q3	Patient Satisfaction	13	8	78	242	108	63	499	17.23%	82.77%
Q4	See Practitioner within 24 hrs	13	23	118	201	103	54	499	28.26%	71.74%
Q5	See practitioner of Choice	19	60	152	176	69	36	493	43.00%	57.00%
Q6	Speak to practitioner on phone	37	30	114	202	93	36	475	30.32%	69.68%
Q7	Comfort of waiting room	12	120	156	143	57	24	500	55.20%	44.80%
Q8	Waiting time	13	82	172	171	57	17	499	50.90%	49.10%
Q9	Satisfaction with Visit	14	4	20	159	189	126	498	4.82%	95.18%
Q10	Warmth of greeting	12	1	13	153	191	142	500	2.80%	97.20%
Q11	Ability to listen	12	1	15	143	204	137	500	3.20%	96.80%
Q12	Explanations	16	3	21	148	197	127	496	4.84%	95.16%
Q13	Reassurance	24	3	20	162	187	116	488	4.71%	95.29%
Q14	Confidence in ability	18	3	11	131	190	159	494	2.83%	97.17%
Q15	Express concerns	17	2	25	146	189	133	495	5.45%	94.55%
Q16	Respect shown	15	1	13	145	166	172	497	2.82%	97.18%
Q17	Time for visit	13	3	62	199	154	81	499	13.03%	86.97%
Q18	Consideration	23	0	32	192	165	100	489	6.54%	93.46%
Q19	Concern for patient	16	3	32	179	165	117	496	7.06%	92.94%
Q20	Recommendation	23	3	29	151	173	133	489	6.54%	93.46%
Q21	Reception staff	7	12	108	206	128	51	505	23.76%	76.24%
Q22	Respect shown	7	12	93	200	125	75	505	20.79%	79.21%
Q23	Information of services	22	14	122	204	94	56	490	27.76%	72.24%
Q24	Complaints/Compliments	135	14	96	162	77	28	377	29.18%	70.82%
Q25	Illness Prevention	78	8	79	176	123	48	434	20.05%	79.95%
Q26	Reminder Systems	131	18	78	152	97	36	381	25.20%	74.80%
Q27	Second opinion/complimentary medicine	215	6	62	125	76	28	297	22.90%	77.10%

Action Plan

<b>Paragraph</b>	<b>Action</b>	<b>By Whom</b>	<b>By When</b>
<b>7 (Q1)</b>	To continue monitoring attendance for extended hours sessions and to review whether to commence working on Saturday morning (comment made from 1 patient).	<b>PM</b>	
<b>7 (Q3)</b>	To continue to monitor the system via the remote software and to investigate whether patients could be persuaded to not contact the surgery during the peak 08:00 to 09:00 period.		
<b>7 (Q3) (Q5)</b>	Implement proposed changes to associates working pattern.	<b>PM/AC</b>	<b>Sep 09</b>
<b>7 (Q4) (6) (17)</b>	Article for practice newsletter and to increase the profile of this element of the practice website (which has over 2000 hits per month).	<b>PM</b>	<b>Sep 09</b>
<b>Q21</b>	Inform the reception staff of their achievement and the need to continue the good work	<b>PM</b>	<b>ASAP</b>
<b>Q22</b>	Confidentiality training	<b>PM</b>	<b>ASAP</b>

# *Certificate of Completion*

This is to certify that

**Crown Heights Medical Centre**

2 Dickson House  
Alencon Link  
BASINGSTOKE  
RG21 7AN

**Practice List Size: 15923**

**Surveys Completed: 399**

has completed the

## **Improving Practice Questionnaire**

Approved for the PE2 Quality Indicator of the GMS Contract

Completed on 26 May 2009



**Michael Greco**  
Director

