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| HUNMANBY SURGERY | PATIENT SURVEY RESULTS AUGUST 2018 |

**GP Practice Patient Survey –AUGUST 2018**

**Hunmanby Surgery**

**Analysis & Feedback**

1. **Appointments**

*If you need to be seen* ***urgently*** *we will try you best to give you an appointment on the same day. This appointment might not be with your regular doctor. If you need a* ***non- urgent*** *appointment we will try our best to give you an appointment within 3 weeks of your call.*

*Considering this appointment system, please tell us how much you agree with the following statements*

1. **If I need an urgent appointment I am usually seen the same day**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Strongly Disagree** | **Disagree** | **Neither Agree nor Disagree** | **Agree** | **Strongly Agreed** | **Did not answer** |
|  | 11% | 11% | 57% | 17% | 4% |

1. **If I need a non- urgent appointment I am usually seen within 3 weeks**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Strongly****Disagree** | **Disagree** | **Neither Agree nor Disagree** | **Agree** | **Strongly Agreed** | **Did not answer** |
|  | 19% | 16% | 57% | 8% |  |

1. **I am happy with the current appointments system**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Strongly Disagree** | **Disagree** | **Neither Agree nor Disagree** | **Agree** | **Strongly Agreed** | **Did not answer** |
| 5% | 16% | 17% | 47% | 8% | 7% |

1. **Dr Jaidev’s ability to communicate with patients**

*I am seeking my patients’ views on what they feel about my professional behaviour and practice and whether they think I could improve the way I work. Please give your honest views.*

1. **Listening to patients**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Strongly Disagree** | **Disagree** | **Neither Agree nor Disagree** | **Agree** | **Strongly Agreed** | **Did not answer** |
| 1% | 3% | 3% | 45% | 44% | 4% |

1. **Communicating effectively**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Strongly Disagree** | **Disagree** | **Neither Agree nor Disagree** | **Agree** | **Strongly Agreed** | **Did not answer** |
| 1% | 1% | 4% | 50% | 40% | 4% |

1. **Friendliness during the consultation**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Strongly Disagree** | **Disagree** | **Neither Agree nor Disagree** | **Agree** | **Strongly Agreed** | **Did not answer** |
| 1.% | 1.% | 3% | 41% | 50% | 4% |

1. **Showing respect**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Strongly Disagree** | **Disagree** | **Neither Agree nor Disagree** | **Agree** | **Strongly Agreed** | **Did not answer** |
| 3% | 1% | 19% | 35% | 35% | 7% |

1. **Involving you in decisions about your care**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Strongly Disagree** | **Disagree** | **Neither Agree nor Disagree** | **Agree** | **Strongly Agreed** | **Did not answer** |
| 1% | 3% | 5% | 60% | 27% | 4% |

1. **You left the practice with confidence after your consultation**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Strongly Disagree** | **Disagree** | **Neither Agree nor Disagree** | **Agree** | **Strongly Agreed** | **Did not answer** |
| 3% | 4% | 5% | 52% | 35% | 1% |

1. **Nurse Appointments**

*Last time you saw or spoke to a Nurse, how good was the consultation? Considering this, please tell*

*us how much you agree with the following statements*

1. **Listening to patients**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Strongly Disagree** | **Disagree** | **Neither Agree nor Disagree** | **Agree** | **Strongly Agreed** | **Did not answer** |
|  |  | 2% | 48% | 48% | 2% |

1. **Communicating effectively**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Strongly Disagree** | **Disagree** | **Neither Agree nor Disagree** | **Agree** | **Strongly Agreed** | **Did not answer** |
|  |  | 6% | 49% | 45% |  |

1. **Friendliness during the consultation**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Strongly Disagree** | **Disagree** | **Neither Agree nor Disagree** | **Agree** | **Strongly Agreed** | **Did not answer** |
|  |  | 4% | 55% | 41% |  |

1. **Showing respect**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Strongly Disagree** | **Disagree** | **Neither Agree nor Disagree** | **Agree** | **Strongly Agreed** | **Did not answer** |
| 3% | 1% | 19% | 35% | 35% | 7% |

1. **Involving you in decisions about your care**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Strongly Disagree** | **Disagree** | **Neither Agree nor Disagree** | **Agree** | **Strongly Agreed** | **Did not answer** |
|  |  | 7% | 47% | 44% | 2% |

1. **You left the practice with confidence after your consultation**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Strongly Disagree** | **Disagree** | **Neither Agree nor Disagree** | **Agree** | **Strongly Agreed** | **Did not answer** |
|  |  | 5% | 53% | 40% | 2% |

1. **Practice Opening Times**

*We appreciate that patients may need flexible opening times. Considering our opening times, please tell us how much you agree with the following statements*

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Monday | Tuesday | Wednesday | Thursday | Friday |
| 8am – 6pm | 8am – 6pm | 8am – 6pm | 8am – 6pm | 8am – 6pm |

1. **The practice is open at times when I can attend an appointment**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Strongly Disagree** | **Disagree** | **Neither Agree nor Disagree** | **Agree** | **Strongly Agreed** | **Did not answer** |
|  | 1% | 15% | 40% | 43% | 1% |

1. **I am happy with the current opening times**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Strongly Disagree** | **Disagree** | **Neither Agree nor Disagree** | **Agree** | **Strongly Agreed** | **Did not answer** |
|  | 7% | 5% | 48% | 39% | 1% |

1. I am unhappy with the current opening times

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Strongly Disagree** | **Disagree** | **Neither Agree nor Disagree** | **Agree** | **Strongly Agreed** | **Did not answer** |
| 27% | 21% | 13% | 11% | 21% | 7% |

1. **I am happy with the Out of Hours Service**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Strongly Disagree** | **Disagree** | **Neither Agree nor Disagree** | **Agree** | **Strongly Agreed** | **Did not answer** |
| 3% | 3% | 29% | 24% | 28% | 13% |

1. **Our Surgery**

*We want to make your visit to the surgery as pleasant as possible. Please tell us how much you agree with the following statements*

1. **The staff are friendly and approachable**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Strongly Disagree** | **Disagree** | **Neither Agree nor Disagree** | **Agree** | **Strongly Agreed** | **Did not answer** |
|  | 3% | 3% | 57% | 37% |  |

1. **Patients are treated fairly**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Strongly Disagree** | **Disagree** | **Neither Agree nor Disagree** | **Agree** | **Strongly Agreed** | **Did not answer** |
|  |  | 13% | 52% | 35% |  |

1. **I am satisfied with the disabled access and facilities**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Strongly Disagree** | **Disagree** | **Neither Agree nor Disagree** | **Agree** | **Strongly Agreed** | **Did not answer** |
|  |  |  |  |  | 100% |

1. **Prescriptions**

*Medication is often an important part of people’s treatment and some people require repeat prescriptions. The practice aims to have all repeat prescriptions ready within 5 days of the patient requesting the prescription.*

1. **When I request a repeat prescription, it is always ready within 5 days**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Strongly Disagree** | **Disagree** | **Neither Agree nor Disagree** | **Agree** | **Strongly Agreed** | **Did not answer** |
|  | 1% | 2% | 47% | 40% | 10% |

1. **I utilise the online prescription ordering facility and find this useful**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Strongly Disagree** | **Disagree** | **Neither Agree nor Disagree** | **Agree** | **Strongly Agreed** | **Did not answer** |
| 3% | 5% | 12% | 20% | 20% | 40% |

1. **I prefer to bring my repeat ordering slip to the practice or order with the reception team**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Strongly** **Disagree** | **Disagree** | **Neither Agree nor Disagree** | **Agree** | **Strongly Agreed** | **Did not answer** |
| 2% | 8% | 17% | 33% | 11% | 29% |

**d) Pharmacies order medication on my behalf**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Strongly Disagree** | **Disagree** | **Neither Agree nor Disagree** | **Agree** | **Strongly Agreed** | **Did not answer** |
| 3% | 22% | 17% | 13% | 20% | 25% |

1. **Friends and Family Test**

*We aim to be a practice that you would be happy to recommend to your friends and family if they needed similar care or treatment*

**I would be likely to recommend Hunmanby Surgery to friends and family if they needed similar care or treatment**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Strongly Disagree** | **Disagree** | **Neither Agree nor Disagree** | **Agree** | **Strongly Agreed** | **Did not answer** |
| 12% | 4% | 8% | 43% | 29% | 4% |

1. **Attending Appointments**

*If you have ever failed to attend an appointment, what stopped you cancelling or rearranging it?*

1. **Getting Involved**

*Did you know that we hold a Patient Participation Group (PPG) four times a year? This group gives our patients the opportunity to get involved in helping improve the practice. If you are interested in finding out more about our patient reference group, tick the box below and make sure that you have filled in your contact details on the front of this form.*

Thank you to all of those that showed an interest. This has been passed on to the Practice Manager.

1. **Equality Monitoring**

*By filling in this equality monitoring section you will help us ensure that we get feedback from all the different communities in our area. Filling in this section is optional. Any information is kept in strict confidence. Are you?*

**Gender**

Male 35 (47%)

Female 40 (53%)

**Age**

Under 16

17-24 3

25-34 3

35-44 8

45-54 8

55-64 6

65-74 15

75-84 12

85+ 2

**Disabled**

Yes

No

Not answered 75

**How often do you visit?**

Regularly 23

Occasionally 13

Very Rarely 19

Not answered 15