Private and Confidential

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Improving Practice Questionnaire Report

Al-Shafa Medical Centre

March 2014





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04 March 2014

Dear Mr Abbas

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).

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 to enable us to improve our services we would be grateful if you could complete a feedback form using the following link:

http://www.cfepsurveys.co.uk/questionnaires/feedback/default.aspx?psid=164333

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

Yours sincerely

Helen Powell Survey Manager

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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 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.

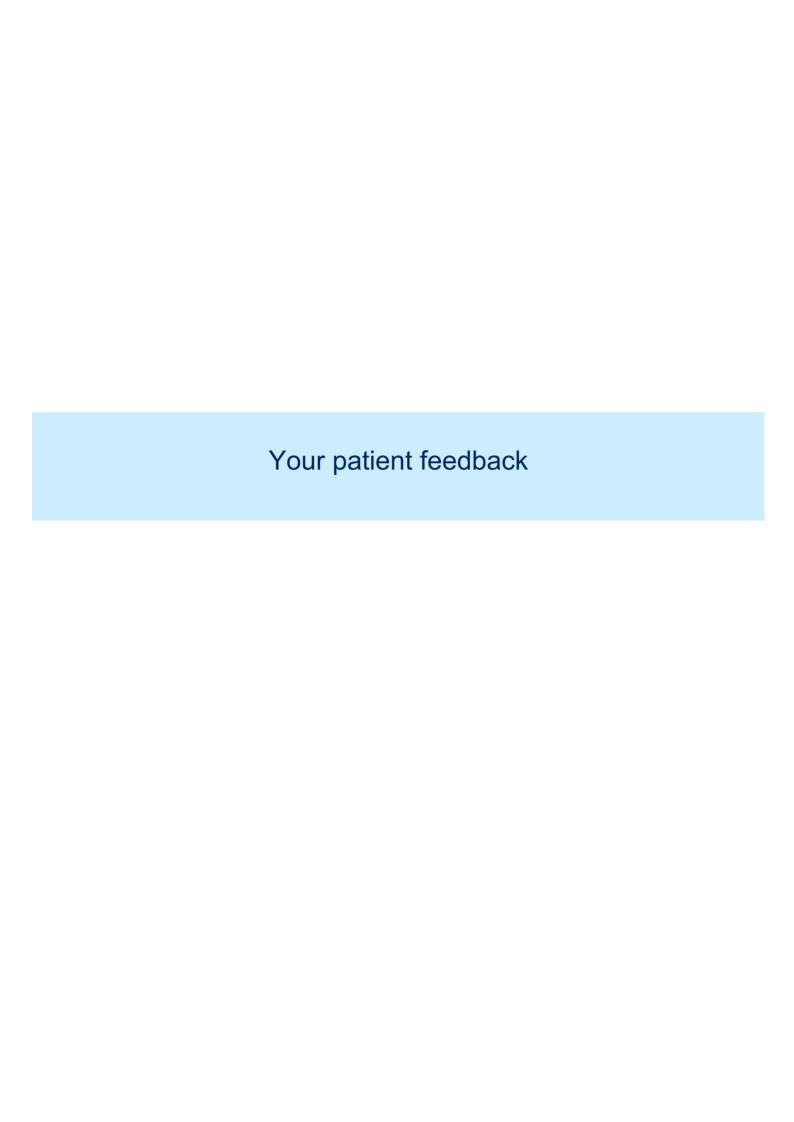


Table 1: Distribution and frequency of ratings, questions 1-28

| Question | Poor | Fair | Good | Very Good | Excellent | Blank/spoilt |
|---|------|------|------|-----------|-----------|--------------|
| Q1 Opening hours satisfaction | 4 | 15 | 62 | 64 | 42 | 1 |
| Q2 Telephone access | 21 | 36 | 59 | 35 | 37 | 0 |
| Q3 Appointment satisfaction | 10 | 35 | 57 | 48 | 37 | 1 |
| Q4 See practitioner within 48hrs | 7 | 35 | 53 | 45 | 45 | 3 |
| Q5 See practitioner of choice | 12 | 37 | 59 | 38 | 35 | 7 |
| Q6 Speak to practitioner on phone | 26 | 35 | 52 | 43 | 27 | 5 |
| Q7 Comfort of waiting room | 11 | 36 | 63 | 42 | 33 | 3 |
| Q8 Waiting time | 21 | 33 | 62 | 30 | 41 | 1 |
| Q9 Satisfaction with visit | 2 | 13 | 40 | 67 | 66 | 0 |
| Q10 Warmth of greeting | 1 | 13 | 28 | 77 | 66 | 3 |
| Q11 Ability to listen | 1 | 11 | 37 | 64 | 73 | 2 |
| Q12 Explanations | 1 | 11 | 32 | 73 | 68 | 3 |
| Q13 Reassurance | 2 | 9 | 36 | 69 | 71 | 1 |
| Q14 Confidence in ability | 2 | 7 | 34 | 66 | 75 | 4 |
| Q15 Express concerns/fears | 2 | 9 | 40 | 69 | 68 | 0 |
| Q16 Respect shown | 2 | 8 | 36 | 70 | 71 | 1 |
| Q17 Time for visit | 2 | 12 | 37 | 68 | 68 | 1 |
| Q18 Consideration | 2 | 13 | 42 | 82 | 49 | 0 |
| Q19 Concern for patient | 2 | 9 | 39 | 77 | 60 | 1 |
| Q20 Self care | 3 | 10 | 36 | 81 | 57 | 1 |
| Q21 Recommendation | 2 | 9 | 39 | 70 | 65 | 3 |
| Q22 Reception staff | 6 | 18 | 51 | 71 | 42 | 0 |
| Q23 Respect for privacy/confidentiality | 2 | 15 | 57 | 71 | 43 | 0 |
| Q24 Information of services | 5 | 10 | 58 | 67 | 46 | 2 |
| Q25 Complaints/compliments | 5 | 19 | 75 | 44 | 40 | 5 |
| Q26 Illness prevention | 4 | 18 | 75 | 57 | 34 | 0 |
| Q27 Reminder systems | 9 | 24 | 61 | 57 | 35 | 2 |
| Q28 Second opinion / comp medicine | 4 | 19 | 64 | 60 | 38 | 3 |

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



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

| | Your mean | | Benc | hmark da | ata (%)* | | |
|---|--------------|-------------------------|------|----------------|----------|-------------------|-----|
| | score (%) | National mean score (%) | Min | Lower quartile | Median | Upper quartile | Max |
| About the practice | | | | <u>'</u> | | | |
| Q1 Opening hours satisfaction | 67 | 69 | 23 | 64 | 68 | 73 | 92 |
| Q2 Telephone access | 54 | 62 | 13 | 53 | 63 | 71 | 92 |
| Q3 Appointment satisfaction | 59 | 68 | 23 | 63 | 68 | 74 | 92 |
| Q4 See practitioner within 48hrs | 62 | 62 | 18 | 54 | 62 | 70 | 96 |
| Q5 See practitioner of choice | 56 | 58 | 22 | 48 | 57 | 65 | 95 |
| Q6 Speak to practitioner on phone | 51 | 61 | 25 | 54 | 61 | 67 | 92 |
| Q7 Comfort of waiting room | 57 | 66 | 27 | 60 | 66 | 71 | 90 |
| Q8 Waiting time | 55 | 56 | 25 | 50 | 56 | 62 | 90 |
| About the practitioner | | | | | | | |
| Q9 Satisfaction with visit | 74 | 80 | 41 | 76 | 81 | 85 | 97 |
| Q10 Warmth of greeting | 76 | 82 | 45 | 78 | 82 | 86 | 96 |
| Q11 Ability to listen | 76 | 82 | 46 | 78 | 83 | 87 | 97 |
| Q12 Explanations | 76 | 81 | 42 | 77 | 81 | 85 | 97 |
| Q13 Reassurance | 76 | 79 | 41 | 75 | 80 | 84 | 98 |
| Q14 Confidence in ability | 78 | 82 | 43 | 79 | 83 | 87 | 99 |
| Q15 Express concerns/fears | 76 | 80 | 45 | 76 | 81 | 85 | 96 |
| Q16 Respect shown | 77 | 84 | 49 | 80 | 85 | 88 | 98 |
| Q17 Time for visit | 75 | 79 | 38 | 75 | 80 | 84 | 96 |
| Q18 Consideration | 72 | 79 | 41 | 75 | 79 | 83 | 98 |
| Q19 Concern for patient | 75 | 80 | 43 | 76 | 80 | 84 | 97 |
| Q20 Self care | 74 | 79 | 38 | 75 | 79 | 83 | 97 |
| Q21 Recommendation | 75 | 81 | 41 | 78 | 82 | 86 | 99 |
| About the staff | | | | | | | |
| Q22 Reception staff | 67 | 76 | 29 | 72 | 77 | 81 | 96 |
| Q23 Respect for privacy/confidentiality | 68 | 76 | 43 | 72 | 76 | 80 | 96 |
| Q24 Information of services | 69 | 73 | 29 | 68 | 73 | 77 | 96 |
| Finally | | | | | | | |
| Q25 Complaints/compliments | 63 | 66 | 31 | 62 | 66 | 70 | 96 |
| Q26 Illness prevention | 63 | 69 | 34 | 64 | 68 | 72 | 96 |
| Q27 Reminder systems | 61 | 68 | 27 | 63 | 68 | 72 | 96 |
| Q28 Second opinion / comp medicine | 65 | 67 | 30 | 62 | 67 | 71 | 96 |
| Overall score | 68 | 73 | 35 | 69 | 73 | 77 | 95 |

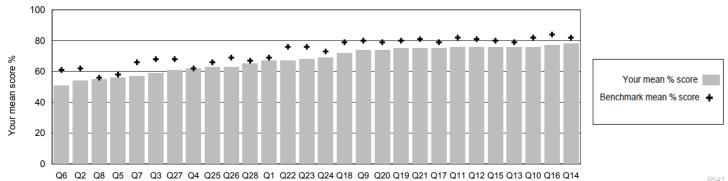
Your mean score for this question falls in the highest 25% of all means Your mean score for this question falls in the middle 50% of all means Your mean score for this question falls in the lowest 25% of all means

*Based on data from 927 practices carrying out 1,326 surveys between April 2010 and March 2013 with 25 or more 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





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

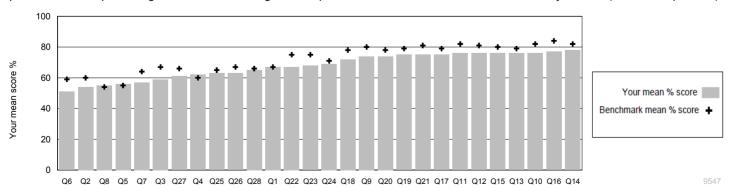
| | Your mean | | Bench | mark dat | a (%)* | | |
|---|--------------|---------------------|-------|----------------|--------|-------------------|-----|
| | score (%) | National mean score | Min | Lower quartile | Median | Upper quartile | Max |
| About the practice | | | | | | | |
| Q1 Opening hours satisfaction | 67 | 67 | 48 | 64 | 67 | 71 | 86 |
| Q2 Telephone access | 54 | 60 | 28 | 54 | 61 | 67 | 85 |
| Q3 Appointment satisfaction | 59 | 67 | 46 | 62 | 67 | 72 | 87 |
| Q4 See practitioner within 48hrs | 62 | 60 | 30 | 53 | 60 | 67 | 86 |
| Q5 See practitioner of choice | 56 | 55 | 28 | 47 | 55 | 61 | 84 |
| Q6 Speak to practitioner on phone | 51 | 59 | 29 | 53 | 58 | 66 | 84 |
| Q7 Comfort of waiting room | 57 | 64 | 39 | 60 | 65 | 69 | 82 |
| Q8 Waiting time | 55 | 54 | 25 | 49 | 55 | 61 | 83 |
| About the practitioner | | | | | | | |
| Q9 Satisfaction with visit | 74 | 80 | 44 | 76 | 80 | 84 | 93 |
| Q10 Warmth of greeting | 76 | 82 | 46 | 78 | 82 | 85 | 94 |
| Q11 Ability to listen | 76 | 82 | 46 | 79 | 82 | 86 | 95 |
| Q12 Explanations | 76 | 81 | 45 | 77 | 81 | 85 | 94 |
| Q13 Reassurance | 76 | 79 | 44 | 76 | 80 | 84 | 94 |
| Q14 Confidence in ability | 78 | 82 | 47 | 79 | 82 | 87 | 95 |
| Q15 Express concerns/fears | 76 | 80 | 46 | 77 | 80 | 84 | 93 |
| Q16 Respect shown | 77 | 84 | 49 | 80 | 84 | 88 | 95 |
| Q17 Time for visit | 75 | 79 | 51 | 76 | 79 | 83 | 94 |
| Q18 Consideration | 72 | 78 | 41 | 74 | 79 | 83 | 91 |
| Q19 Concern for patient | 75 | 79 | 43 | 76 | 80 | 84 | 93 |
| Q20 Self care | 74 | 78 | 46 | 75 | 79 | 82 | 91 |
| Q21 Recommendation About the staff | 75 | 81 | 47 | 78 | 82 | 86 | 95 |
| Q22 Reception staff | 67 | 75 | 29 | 72 | 76 | 79 | 90 |
| Q23 Respect for privacy/confidentiality | 68 | 75 | 45 | 72 | 75 | 78 | 88 |
| Q24 Information of services | 69 | 71 | 29 | 68 | 72 | 75 | 87 |
| Finally | | | | | | | |
| Q25 Complaints/compliments | 63 | 65 | 50 | 62 | 66 | 69 | 85 |
| Q26 Illness prevention | 63 | 67 | 36 | 64 | 67 | 71 | 85 |
| Q27 Reminder systems | 61 | 66 | 29 | 63 | 66 | 70 | 85 |
| Q28 Second opinion / comp medicine | 65 | 66 | 53 | 62 | 66 | 69 | 86 |
| Overall score | 68 | 72 | 45 | 69 | 72 | 76 | 87 |

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

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.

Graph 2: Your mean percentage scores in ascending order of performance with benchmark mean scores by list size (6001-8000 patients)





^{*}Based on data from 171 practices carrying out 247 surveys between April 2010 and March 2013 with 25 or more responses.

Table 4: Your patient demographics

Number of patient responses by category, your mean percentage scores and bence

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

| Number of | Your mean | |
|-----------|--------------|---|
| responses | score (%) | r |

| Benchmark data (%)* | | | | | | | |
|-------------------------------|---------|-------------------|--------|-------------------|---------|--|--|
| National mean score (%) | Minimum | Lower Quartile | Median | Upper Quartile | Maximum | | |

Age

| Under 25 | 32 | 71 |
|----------|-----|----|
| 25 - 59 | 104 | 68 |
| 60 + | 48 | 67 |
| Blank | 4 | - |

| 70 | 44 | 65 | 70 | 75 | 92 |
|----|----|----|----|----|----|
| 71 | 44 | 68 | 72 | 75 | 93 |
| 74 | 43 | 71 | 75 | 78 | 87 |
| - | - | - | - | - | - |

Gender

| Female | 82 | 65 |
|--------|----|----|
| Male | 96 | 72 |
| Blank | 10 | 55 |

| 72 | 42 | 68 | 72 | 76 | 86 |
|----|----|----|----|----|----|
| 73 | 46 | 69 | 74 | 77 | 91 |
| 71 | 45 | 65 | 71 | 75 | 93 |

Visit usual practitioner

| Yes | 138 | 70 |
|-------|-----|----|
| No | 32 | 62 |
| Blank | 17 | 58 |

| 74 | 46 | 71 | 75 | 78 | 90 |
|----|----|----|----|----|----|
| 69 | 38 | 65 | 69 | 73 | 92 |
| 71 | 46 | 66 | 71 | 75 | 87 |

Years attending

| < 5 years | 25 | 63 |
|--------------|-----|----|
| 5 - 10 years | 49 | 64 |
| > 10 years | 107 | 71 |
| Blank | 6 | 55 |

| 72 | 53 | 68 | 72 | 76 | 92 |
|----|----|----|----|----|----|
| 71 | 38 | 67 | 72 | 76 | 91 |
| 73 | 45 | 69 | 73 | 77 | 85 |
| 71 | 45 | 66 | 70 | 77 | 92 |

^{*}Based on data from 171 practices carrying out 247 surveys between April 2010 and March 2013 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.





Table 5: Your current and previous mean percentage scores*

| | Current scores | 14/08/2012 |
|---|----------------|------------|
| Q1 Opening hours satisfaction | 67 | 51 |
| Q2 Telephone access | 54 | 45 |
| Q3 Appointment satisfaction | 59 | 46 |
| Q4 See practitioner within 48hrs | 62 | 41 |
| Q5 See practitioner of choice | 56 | 35 |
| Q6 Speak to practitioner on phone | 51 | 29 |
| Q7 Comfort of waiting room | 57 | 69 |
| Q8 Waiting time | 55 | 43 |
| Q9 Satisfaction with visit | 74 | 44 |
| Q10 Warmth of greeting | 76 | 46 |
| Q11 Ability to listen | 76 | 46 |
| Q12 Explanations | 76 | 45 |
| Q13 Reassurance | 76 | 44 |
| Q14 Confidence in ability | 78 | 47 |
| Q15 Express concerns/fears | 76 | 46 |
| Q16 Respect shown | 77 | 49 |
| Q17 Time for visit | 75 | 51 |
| Q18 Consideration | 72 | 41 |
| Q19 Concern for patient | 75 | 43 |
| Q20 Self care | 74 | 46 |
| Q21 Recommendation | 75 | 47 |
| Q22 Reception staff | 67 | 29 |
| Q23 Respect for privacy/confidentiality | 68 | 45 |
| Q24 Information of services | 69 | 29 |
| Q25 Complaints/compliments | 63 | 70 |
| Q26 Illness prevention | 63 | 36 |
| Q27 Reminder systems | 61 | 29 |
| Q28 Second opinion / comp medicine | 65 | 59 |
| Overall score | 68 | 45 |



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

Any comments about how this practice could improve its service?

- I can't think of any improvements. I was very happy with the service.
- No.
- No.
- No, I was happy with the service.
- This doctor is a kind and caring doctor.
- Better waiting facilities, appointment system and the way patients are called in to see the doctor.
- Have better appointment system for emergency, especially for children.
- Receptionist should be trained how to deal with the public respectfully and professionally.
- Receptionist need more training.
- Nothing.
- None.
- This is overall a good practice for us.
- It is very hard to get through on the phones, keeps ringing. I can never seem to speak to a GP on the phone. Appointment system needs to be improved. Pre-booked appointments are too far away with regular GP.
- Very good practice.
- Improve waiting time to book appointment. To be able to take appointments for morning surgery over the phone. Also time it takes to get through on the phone is too long.
- Good practice.
- Good.
- Good.
- Good practice.
- Good practice.
- Would help pass the time if there were magazines to read only so many times you can read the same leaflets.
- Some type of toys to occupy children in the waiting room.
- What I can't understand when you ask reception to see a particular doctor they say they're not in today but there are.
- Less waiting time.
- I am personally very pleased with staff and doctors with their general behaviour. I live very far but they consider this in respect of giving me appointment etc. I wish them all well.
- Give you opportunity to see the doctor of your choice. Should not have to wait weeks to be able to see the doctor of your choice.
- Getting appointments via the phone is major problem. Can't get quick appointment and to see doctor of our choice.
- No improvements are necessary.
- Very happy.
- The are really, really bad. They give appointment after 2 weeks even the person is really bad.



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

Any comments about how this practice could improve its service?

- Bring back the telephone appointment service, this will reduce people queuing up early in the morning in the freezing cold, especially for elderly and very sick patients.
- Very hard to get through to someone on the phone or book appointments.

Any comments about how the doctor/nurse could improve?

- This doctor is very friendly and understanding. Just more advice regarding the illness would help for better understanding.
- No.
- Excellent service by my doctor.
- Very good, friendly doctor.
- Phone consultations. Saves appointment time, some things can be dealt with over the phone rather than waiting appointment.
- Excellent.
- More patient care. Phone consultations triage, ideally this is working well within most practices.
- Excellent. Very caring.
- Very good doctor.
- Excellent.
- Excellent.
- · A good doctor.
- Very good.
- The doctor is very friendly and caring.
- All the doctors should listen to you and take your opinion into account, should not have to prevent seeing certain doctors as I feel they do not take you seriously and put your health at risk.
- Nurse is excellent, they will go out of her way to help. Doctors are not too helpful.
- Nurse is good.
- To see a doctor they are bad. They are really really bad. Honestly opinion.
- Doctors should give more advice on the illness just so everyone understands.
- Maybe explain stuff a little bit properly and clearly.





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 = 188

| Questionnaire rating scale | Poor | Fair | Good | Very Good | Excellent | Blank/spoilt |
|-------------------------------|------|----------|------|-----------|-----------|--------------|
| Number of ratings | 4 | 15 62 64 | | 64 | 42 | 1 |
| Value assigned to each rating | 0 | 25 | 50 | 75 | 100 | n/a |

Your mean percentage score for Q1 = 67%

Explanation of quartiles

In statistics a quartile is any one of the three values that divide data into four equal parts, each part represents ¼ 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 score (%) | | | |
|-------------------------------|---------------------------|--|--|--|
| Q1 Opening hours satisfaction | 67 | | | |

| Benchmark data (%)* | | | | | | |
|---------------------|----------------|--------|-------------------|-----|--|--|
| Min | Lower quartile | Median | Upper quartile | Max | | |
| 23 | 64 | 68 | 73 | 92 | | |

*Based on data from 927 practices carrying out 1,326 surveys between April 2010 and March 2013 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



| OFFICE USE ONLY | 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
- All the information provided by patients is put together in a report for the practice. Your answers will not be identifiable.
 Any comments you make will be included but all attempts will be made to remove information that could identify you.
- Once completed, please return this survey to reception in the envelope provided

Please mark the box like this with a blue or black 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 | Chances of seeing a doctor/nurse within 48 hours | | | | | |
| 5 | Chances of seeing a doctor/nurse of <u>your</u> choice | | | | | |
| 6 | Opportunity of speaking to a doctor/nurse on the telephone when necessary | | | | | |
| 7 | Comfort level of waiting room (e.g. chairs, magazines) | | | | | |
| 8 | Length of time waiting in the practice | | | | | |
| Ab | out the doctor/nurse (whom you have just seen) | Poor | Fair | Good | Very good | Excellent |
| 9 | My overall satisfaction with this visit to the doctor/nurse is | | | | | |
| 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 | | | | | |

Please turn over 🖰







| Ab | out the doctor/nurse (continued) | Poor | Fair | Good | Very good | Excellent |
|---|--|------------------------------|-----------|------|--------------|-----------|
| 18 | This doctor/nurse's consideration of my personal situation in deciding a treatment or advising me was | | | | | |
| 19 | The doctor/nurse's concern for me as a person on this visit was | | | | | |
| 20 | The extent to which the doctor/nurse helped me to take care of myself was | | | | | |
| 21 | The recommendation I would give to my friends about this doctor/nurse would be | | | | | |
| Abo | out the staff | Poor | Fair | Good | Very good | Excellent |
| 22 | The manner in which you were treated by the reception staff | | | | | |
| 23 | Respect shown for your privacy and confidentiality | | | | | |
| 24 | Information provided by the practice about its service (e.g. repeat prescriptions, test results, cost of private certificates etc) | | | | | |
| Fin | ally | Poor | Fair | Good | Very good | Excellent |
| 25 | The opportunity for making compliments or complaints to this practice about its service and quality of care | | | | | |
| 26 | 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) | | | | | |
| 27 | The availability and administration of reminder systems for ongoing health checks is | | | | | |
| The practice's respect of your right to seek a second opinion or complementary medicine was | | | | | | |
| Any | comments about how this practice could improve its service? | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| Any | comments about how the doctor/nurse could improve? | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| TI | he following questions provide us only with general information about survey. No one at the practice will be able to ident | | | | sponded | to this |
| How in ye | old are you Are you: Was this visit with your usual clinician? | How many ye been attendin | | | | |
| | Under 25 Female Yes | Less th | nan 5 yea | rs | | |
| | 25-59 | 5-10 ye | ears | | | |
| | 60+ | More to | nan 10 ye | ears | | |

Thank you for your time and assistance



Certificate of Completion

This is to certify that

Al-Shafa Medical Centre

5-7 Little Oaks Road Ashton Birmingham West Midlands B6 6JY

Practice List Size: 7500 Surveys Completed: 188

has completed the

Improving Practice Questionnaire

Completed on 04 March 2014

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.